2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006341

City-St-Zip:

LONGMEADOW, MA 01106

Entity Name: UNITED CAPITAL MORTGAGE LENDING CO.

FILED Apr 07, 2006 Secretary of State

| Current P | rincipal Plac | e of Business: | New Principal Place | New Principal Place of Business: | |
|--|---|--------------------------------|---|---|--|
| | ESIDE CENTF | RE WAY | | | |
| SUITE 140 KNOXVILL |) _E, TN 37922 | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| SUITE 140 | | RE WAY | | | |
| | _E, TN 37922 | | | | |
| FEI Number | : 62-1738985 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of | Current Registered Agent: | Name and Address o | f New Registered Agent: | |
| WILLIAMSON, TIM 1601 SOUTH OCEAN DR #208 JACKSONVILLE BEACH, FL 32250 US | | | | WILLIAMSON, TIM 1326 SOUTH 6TH STREET JACKSONVILLE BEACH, FL 32250 US | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: TIM WILLIAMSON | | | | 04/07/2006 | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| Election Ca | mpaign Financir | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | P (WILLIAMSON, 9006 FARREL KNOXVILLE, T | L PARK LN | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | S (MCGEE, ROG 1156 CHULA \ FRIENDSVILL | ISTA DR | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | BRADLEY, WI | SWORTH AVE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D (CAMBI, JOSE 290 SHAKER I | | Title: Name: Address: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JACK WILLIAMSON PRES 04/07/2006