

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001513

FILED  
Jan 21, 2005  
Secretary of State

Entity Name: METAMERICA MORTGAGE BANKERS, INC.

## Current Principal Place of Business:

250 INTERNATIONAL PARKWAY  
134  
LAKE MARY, FL 32746

## New Principal Place of Business:

## Current Mailing Address:

5151 BONNEY ROAD  
SUITE 107  
VIRGINIA BEACH, VA 23462

## New Mailing Address:

FEI Number: 54-1761455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLAALIEN, ROGER D  
3335 HORSESHOE BEND CT.  
LONGWOOD, FL 32779      US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: SLAALIEN, ROGER  
Address: 250 INTERNATIONAL PARKWAY, SUITE 134  
City-St-Zip: LAKE MARY, FL 32746

Title: PS ( ) Delete  
Name: SLAALIEN, NOREEN K  
Address: 250 INTERNATIONAL PARKWAY, SUITE 134  
City-St-Zip: LAKE MARY, FL 32746

Title: EVP ( ) Delete  
Name: BELTRAN, ANNA E  
Address: 5316 SIX FORKS RD., SUITE 200  
City-St-Zip: RALEIGH, NC 27609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: NOREEN SLAALIEN

PS

01/21/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date