2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006312

Entity Name: LOWRY MORTGAGE NETWORK, INC.

5887 GLENRIDGE DR, STE 100

ATLANTA, GA 30328

Address:

City-St-Zip:

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5887 GLENRIDGE DR 100 ATLANTA, GA 30328 **New Mailing Address: Current Mailing Address:** 5887 GLENRIDGE DR ATLANTA, GA 30328 FEI Number: 58-2407966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CDST () Delete Title: () Change () Addition LOWRY, JOHN S PRES. Name: Name: 5887 GLENRIDGE DR, STE 100 Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: PVP Title: () Change () Addition () Delete Name: LOWRY, JOHN S PRES 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 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.

SIGNATURE: JOHN S. LOWRY PRES 04/18/2006