2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005
Secretary of State

DOCUMENT# F04000000841

Entity Name: COMPMORT MORTGAGE, INC.

Current Principal Place of Business:

4306 WEAVER PARKWAY
WARRENVILLE, IL 60555

New Principal Place of Business:

27755 DIEHL ROAD
SUITE 300
WARRENVILLE, IL 60555

Current Mailing Address:

4306 WEAVER PARKWAY
WARRENVILLE, IL 60555

New Mailing Address:

27755 DIEHL ROAD
WARRENVILLE, IL 60555

FEI Number: 36-4322204 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PC ( ) Delete
Name: GRAHAM, DANIEL SCOTT
Address: 27W330 WALLACE RD
City-St-Zip: WHEATON, IL 60187

Title: S ( ) Delete
Name: KOCHAN, CAROL M
Address: 1011 SOUTHPORT AVE
City-St-Zip: LISLE, IL 60532

Title: T ( ) Delete
Name: WILLIAMSON, KEVIN A
Address: 2040 W WIESBROOK RD
City-St-Zip: WHEATON, IL 60187

Title: D ( ) Delete
Name: GRAHAM, RUSSELL J
Address: 510 N ELLIS
City-St-Zip: WHEATON, IL 60187

Title: D ( ) Delete
Name: BOWEN, JAMES ALLEN
Address: 415 W UNION
City-St-Zip: WHEATON, IL 60187

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:

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: KEVIN A. WILLIAMSON CFO 02/17/2005

Electronic Signature of Signing Officer or Director — Date