

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001028

FILED
Feb 17, 2005
Secretary of State

Entity Name: ACADEMY MORTGAGE CORPORATION

Current Principal Place of Business:

4055 SOUTH 700 EAST #200
SALT LAKE CITY, UT 84107

New Principal Place of Business:

Current Mailing Address:

4055 SOUTH 700 EAST #200
SALT LAKE CITY, UT 84107

New Mailing Address:

FEI Number: 87-0456373

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: CP () Delete
Name: SHAW, DUANE
Address: 1559 RIVER OAKS DRIVE
City-St-Zip: SANDY, UT 84093

Title: VPST () Delete
Name: HERBERT, CAROLYN
Address: 9616 GLASS SLIPPER ROAD
City-St-Zip: SANDY, UT 84092

Title: D () Delete
Name: KESSLER, ADAM
Address: 7283 APPLE HONEY LANE #20
City-St-Zip: MIDVALE, UT 84047

Title: VP (X) Delete
Name: BURGNER, JON
Address: 3913 WEST YORKSHIRE DRIVE
City-St-Zip: SOUTH JORDAN, UT 84095

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:

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: CAROLYN HERBERT

VPST

02/17/2005

Electronic Signature of Signing Officer or Director

_____ Date