

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004869

FILED  
Mar 02, 2005  
Secretary of State

Entity Name: OPPORTUNITY MORTGAGE, INC.

## Current Principal Place of Business:

111 S. WASHINGTON AVE.  
BROWNSVILLE, TN 38012

## New Principal Place of Business:

4522 EXECUTIVE DRIVE.  
SUITE 201  
NAPLES, FL 34119 US

## Current Mailing Address:

111 S. WASHINGTON AVE.  
BROWNSVILLE, TN 38012

## New Mailing Address:

4522 EXECUTIVE DRIVE  
SUITE 201  
NAPLES, FL 34119 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

BATLIS, ELAINE W PRES.  
4522 EXECUTIVE DRIVE,  
SUITE 201  
NAPLES, FL 34119 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: ELAINE W. BATLIS

03/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BATLIS, ELAINE  
Address: 7200 W. CAMINO REAL, STE. 200  
City-St-Zip: BOCA RATON, FL 33433

Title: STD ( ) Delete  
Name: CLINTON, PHIL  
Address: P.O. BOX 879  
City-St-Zip: BROWNSVILLE, TN 38012

Title: D ( ) Delete  
Name: HERNDON, TOM  
Address: P.O. BOX 879  
City-St-Zip: BROWNSVILLE, TN 38012

Title: D ( ) Delete  
Name: CLINTON, J.D.  
Address: P.O. BOX 879  
City-St-Zip: BROWNSVILLE, TN 38012

Title: D ( ) Delete  
Name: SHARPE, JOHN  
Address: P.O. BOX 879  
City-St-Zip: BROWNSVILLE, TN 38012

Title: D ( ) Delete  
Name: WILLIAMS, GEORGE  
Address: P.O. BOX 879  
City-St-Zip: BROWNSVILLE, TN 38012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BATLIS, ELAINE  
Address: 4522 EXECUTIVE DRIVE, SUITE 201  
City-St-Zip: NAPLES, FL 34119

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: ELAINE W. BATLIS

PD

03/02/2005

Electronic Signature of Signing Officer or Director

Date