2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001142

Entity Name: NATION ONE MORTGAGE COMPANY, INC.

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
700 LONGWATER DRIVE NORWELL, MA 02061					
Current Mailing Address:			New Mailing Address:		
700 LONGWATER DRIVE NORWELL, MA 02061					
FEI Number:	04-3070642	FEI Number Applied For () FEI Num	nber Not Applic	able ()	Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:	Name and A	Address of Ne	ew Registered Agent:
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:					
	Electro	nic Signature of Registered Agent			Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PC (TRUBUNA, MA 700 LONGWA [*] NORWELL, MA	TER DRIVE	Title: Name: Address: City-St-Zip:	()(Change () Addition
Title: Name: Address: City-St-Zip:	VD (SMILEY, HEAT 700 LONGWA' NORWELL, MA	TER DRIVE	Title: Name: Address: City-St-Zip:	()(Change () Addition
Title: Name: Address: City-St-Zip:	VP (BELL, KEVIN F 700 LONGWA' NORWELL, MA	TER DR.	Name: Address:	VP (X) (BALL, KEVIN R 700 LONGWATE NORWELL, MA	
Title: Name: Address: City-St-Zip:	AVP (AMOROSO, AN 700 LONGWA ⁻ NORWELL, MA	TER DR.	Name: Address:	AVP (X) (HOWARD, CHRIS 700 LONGWATE NORWELL, MA	R DR.
Title: Name: Address: City-St-Zip:	AVP (NEENAN, PATI 700 LONGWA ⁻ NORWELL, MA	TER DR.	Title: Name: Address: City-St-Zip:	()(Change () Addition
Title: Name: Address: City-St-Zip:	AVP (BUNS, CHRIST 700 LONGWA' NORWELL, MA	ΓER DR.	Name: Address:	AVP (X) 0 BUTTS, CHRISTO 700 LONGWATE NORWELL, MA	R DR.

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: CHRISTOPHER D. HOWARD AVP 04/09/2007