

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001603

FILED
Jan 09, 2006
Secretary of State

Entity Name: UNISOURCE MORTGAGE SERVICES, INCORPORATED

Current Principal Place of Business:

ONE CARDINAL CT, STE 10
HILTON HEAD ISLAND, SC 29926

New Principal Place of Business:

Current Mailing Address:

ONE CARDINAL CT, STE 10
HILTON HEAD ISLAND, SC 29926

New Mailing Address:

FEI Number: 58-2274727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANZ, GARY P
511 FIELDSTREAM BLVD.
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

FLETCHER, JONATHAN S
651 LAKEHAVEN CIRCLE
ORLANDO, FL 32828 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: JONATHAN S. FLETCHER

01/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FLETCHER, JAMES W
Address: ONE CARDINAL CT, STE 10
City-St-Zip: HILTON HEAD ISLAND, SC 29926

Title: VP () Delete
Name: FLETCHER, JAMES W JR
Address: ONE CARDINAL CT, STE 10
City-St-Zip: HILTON HEAD ISLAND, SC 29926

Title: VP () Delete
Name: FLETCHER, JONATHAN S
Address: ONE CARDINAL CT, STE 10
City-St-Zip: HILTON HEAD ISLAND, SC 29926

Title: S () Delete
Name: FLETCHER, JAMES JR
Address: ONE CARDINAL CT, STE 10
City-St-Zip: HILTON HEAD ISLAND, SC 29926

Title: D () Delete
Name: FLETCHER, MATTHEW H
Address: 40 WEST ST
City-St-Zip: WEYMOUTH, MA 02190

Title: D () Delete
Name: FLETCHER, JOEL D
Address: 7421 EAST SPARTAN BLVD.
City-St-Zip: CHARLESTON, SC 29418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: FLETCHER, JONATHAN S
Address: 1858 NORTH ALAFAYA TRAIL, STE 201
City-St-Zip: ORLANDO, FL 32826

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 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: JONATHAN S. FLETCHER

VP

01/09/2006

Electronic Signature of Signing Officer or Director

Date