

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002265

FILED
Apr 06, 2006
Secretary of State

Entity Name: MORTGAGE CHAMPS SETTLEMENT SERVICES, INC.

Current Principal Place of Business:

1424 EASTON RD., SUITE 100A
HORSHAM, PA 19044

New Principal Place of Business:

Current Mailing Address:

1424 EASTON RD., SUITE 100A
HORSHAM, PA 19044

New Mailing Address:

FEI Number: 14-1842015

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: P () Delete
Name: FREEZMAN, GLENN
Address: 1420 RINGNECK LOOP
City-St-Zip: DRESHER, PA 19025

Title: V () Delete
Name: ESPOSITO, NADINE
Address: 4502 SCENICVIEW CIRCLE
City-St-Zip: DOYLESTOWN, PA

Title: D () Delete
Name: RZEPSKI, NICOLE
Address: 2520 LOCKLEIGH RD
City-St-Zip: JAMISON, PA 18929

Title: D () Delete
Name: SADOFF, BETH
Address: 32 FARMHOUSE LANE
City-St-Zip: RICHBORO, PA

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 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: GLENN FREEZMAN

PRES

04/06/2006

Electronic Signature of Signing Officer or Director

_____ Date