2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001699

Entity Name: UNITED FUNDING MORTGAGE CORP

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3600 MANSELL RD., STE. 275 ALPHARETTA, GA 30022 **Current Mailing Address: New Mailing Address:** 3600 MANSELL RD., STE. 275 ALPHARETTA, GA 30022 FEI Number: 20-2433404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD., STE. 101 TALLAHASSEE, FL 323012960 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DIRE () Delete () Change () Addition Name: BREWER, JAMES Name: 1522 RIDGELAND CT. Address: Address: City-St-Zip: LILBURN, GA 30047 City-St-Zip: DIRE Title: Title: () Delete () Change () Addition Name: BREWER, GENE Name: 111 WYNDHAM COVE Address: Address: CHERRYVILLE, NC 28021 City-St-Zip: City-St-Zip: Title: Title: DIRE () Delete () Change () Addition BREWER, DENA Name: Name: 111 WYNDHAM COVE Address: Address: CHERRYVILLE, NC 28021 City-St-Zip: City-St-Zip: Title: DIRE () Delete Title: () Change () Addition DUFFY, JOY L. Name: Name: Address: 2360 WOODCOVE DR. Address: City-St-Zip: CUMMING, GA 30041 City-St-Zip: Title: **PRES** Title: () Delete () Change () Addition WATKINS, JOHN A. Name: Name: 2135 WOOD FALLS DR. Address: Address: City-St-Zip: CUMMING, GA 30041 City-St-Zip: Title: () Delete Title: () Change () Addition FOOTE, GREG E. Name: Name: Address: 988 EMORY PARC PL Address: City-St-Zip: City-St-Zip: DECATUR, GA 30033

I hereby certify that the information supplied with this filing does not qualify 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: GREG FOOTE EVP 01/04/2008