

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004618

FILED
Mar 19, 2008
Secretary of State

Entity Name: 1ST PERSONAL MORTGAGE SERVICE, INC.

Current Principal Place of Business:

8062 BRIGHTWOOD COURT
ELLICOTT CITY, MD 21043

New Principal Place of Business:

3280 PINE ORCHARD LANE
SUITE C
ELLICOTT CITY, MD 21042

Current Mailing Address:

8062 BRIGHTWOOD COURT
ELLICOTT CITY, MD 21043

New Mailing Address:

3280 PINE ORCHARD LANE
SUITE C
ELLICOTT CITY, MD 21042

FEI Number: 20-4313587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 EAST 6TH AVENUE
TALALHASSEE, FL 32303 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: CD () Delete
Name: COLVARD, BEN H III
Address: 8062 BRIGHTWOOD COURT
City-St-Zip: ELLICOTT CITY, MD 21043

Title: VD () Delete
Name: COLVARD, BEN H IV
Address: 8062 BRIGHTWOOD COURT
City-St-Zip: ELLICOTT CITY, MD 21043

Title: P () Delete
Name: JENSEN, MARK K
Address: 8062 BRIGHTWOOD COURT
City-St-Zip: ELLICOTT CITY, MD 21043

Title: EVP () Delete
Name: REIN, BART A
Address: 8062 BRIGHTWOOD COURT
City-St-Zip: ELLICOTT CITY, MD 21043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: COLVARD, BEN H III
Address: 3280 PINE ORCHARD LANE, SUITE C
City-St-Zip: ELLICOTT CITY, MD 21042

Title: VD (X) Change () Addition
Name: COLVARD, BEN H IV
Address: 3280 PINE ORCHARD LANE, SUITE C
City-St-Zip: ELLICOTT CITY, MD 21042

Title: P (X) Change () Addition
Name: JENSEN, MARK K
Address: 3280 PINE ORCHARD LANE, SUITE C
City-St-Zip: ELLICOTT CITY, MD 21042

Title: EVP (X) Change () Addition
Name: REIN, BART A
Address: 3280 PINE ORCHARD LANE, SUITE C
City-St-Zip: ELLICOTT CITY, MD 21042

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: BEN H COLVARD III

CEO

03/19/2008

Electronic Signature of Signing Officer or Director

Date