2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005854

Entity Name: GENERATION MORTGAGE COMPANY

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3565 PIEDMONT RD., 3 PIEDMONT CENTER SUITE 300 ATLANTA, GA 30305				3565 PIEDMONT ROAD NE, 3 PIEDMONT CENTER SUITE 300 ATLANTA, GA 30305		
Current Mailing Address:				New Mailing Address:		
3565 PIEDMONT RD., 3 PIEDMONT CENTER SUITE 300 ATLANTA, GA 30305				3565 PIEDMONT ROAD NE, 3 PIEDMONT CENTER SUITE 300 ATLANTA, GA 30305		
FEI Number:	27-0016233	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 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	t			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR						
Title: Name: Address: City-St-Zip:	D () E LEWIS, JEFFRE 135 E. 57 STREE NEW YORK, NY	ET, 8TH FLOOR		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	CURCIO, DOMIN	EST, SUITE 4900		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	EVP () E YOUNG, RICHAR 4399 ARDEN WA SACRAMENTO, G	AY		Title: Name: Address: City-St-Zip:	YOUNG, RIC 1860 HOWE	(X) Change()Addition CHARD L. AVENUE, SUITE 100 TO, CA 95825
Title: Name: Address: City-St-Zip:	MORRIS, JOSEF	RD., 3 PIEDMONT CENTER		Title: Name: Address: City-St-Zip:	MORRIS, JO	ONT ROAD NE, 3 PIEDMONT CENTER
Title: Name: Address: City-St-Zip:	MORRIS, JOSÉF 3565 PIEDMONT ATLANTA, GA 30	RD., 3 PIEDMONT CENTER 0305		Title: Name: Address: City-St-Zip:	MORRIS, JC 3565 PIEDM ATLANTA, G	IONT ROAD NE, 3 PIEDMONT CENTER A 30305
Title: Name: Address: City-St-Zip:	GOLDSMITH, CH	RD., 3 PIEDMONT CENTER		Title: Name: Address: City-St-Zip:	GOLDSMITH	ONT ROAD NE, 3 PIEDMONT CENTER

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: JOSEPH A. MORRIS PRES 03/03/2009