2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008
Secretary of State

DOCUMENT# F06000006827

Entity Name: ONE EIGHT HUNDRED EAST WEST MORTGAGE COMPANY, INC.

Current Principal Place of Business:

36 WHISPER DR
WORCESTER, MA 01609

New Principal Place of Business:

Current Mailing Address:

36 WHISPER DR
WORCESTER, MA 01609

New Mailing Address:

FEI Number: 20-5752002 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CT ( ) Delete
Name: MASSAD, DAVID G
Address: 14 JEFFERSON RD
City-St-Zip: WESTBORO, MA 01581

Title: VC ( ) Delete
Name: ISAAC, GEORGE J
Address: 836 CHARLESTOWN MEADOWS DR
City-St-Zip: WESTBORO, MA 01581

Title: DS ( ) Delete
Name: MASSAD, PAMELA A
Address: 9 JEFFERSON RD
City-St-Zip: WESTBORO, MA 01581

Title: D ( ) Delete
Name: INGRAM, HERBERT
Address: 44 ELM ST
City-St-Zip: WORCESTER, MA 01609

Title: P ( ) Delete
Name: BERNOTAS, DAVID
Address: 55 ALGONQUIN RD
City-St-Zip: CANTON, MA 32021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: MASSAD, DAVID G
Address: 14 JEFFERSON RD
City-St-Zip: WESTBORO, MA 01581

Title: D (X) Change ( ) Addition
Name: ISAAC, GEORGE J
Address: 836 CHARLESTOWN MEADOWS DR
City-St-Zip: WESTBORO, MA 01581

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 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: PAMELA A. MASSAD DS 03/21/2008

Electronic Signature of Signing Officer or Director — Date