

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006991

FILED
Mar 13, 2008
Secretary of State

Entity Name: MILLENNIUM MORTGAGE CAPITAL COMPANY

Current Principal Place of Business:

43645 MONTEREY AVE STE D
PALM DESERT, CA 922609309

New Principal Place of Business:

43645 MONTEREY AVE STE D
PALM DESERT, CA 922609309 US

Current Mailing Address:

43645 MONTEREY AVE STE D
PALM DESERT, CA 922609309

New Mailing Address:

43645 MONTEREY AVE STE D
PALM DESERT, CA 922609309 US

FEI Number: 33-0753543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CERRETA, JOHN
1308 SONOMA CT
PALM BEACH GARDENS, FL 33410 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: CDPS () Delete
Name: PLATT, BRENT
Address: 43645 MONTEREY AVE STE D
City-St-Zip: PALM DESERT, CA 922609309

Title: T () Delete
Name: PLATT, BRENT
Address: 43645 MONTEREY AVE STE D
City-St-Zip: PALM DESERT, CA 922609309

Title: VS () Delete
Name: FARRIS, KELLY
Address: 43645 MONTEREY AVE STE D
City-St-Zip: PALM DESERT, CA 922609309

Title: VS () Delete
Name: LOPEZ, VERONICA
Address: 43645 MONTEREY AVE STE D
City-St-Zip: PALM DESERT, CA 922609309

Title: VS (X) Delete
Name: SHERRY, MIKE
Address: 43645 MONTEREY AVE STE D
City-St-Zip: PALM DESERT, CA 922609309

Title: S (X) Delete
Name: FARIAS, ILEANA
Address: 15455 SAN FERNANDO MISSION BLVD. #200
City-St-Zip: MISSION HILLS, CA 91345

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:

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: BRENT PLATT

CDPS

03/13/2008

Electronic Signature of Signing Officer or Director

Date