

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001374

FILED
Jan 14, 2009
Secretary of State

Entity Name: STANDARD MORTGAGE CORPORATION OF LOUISIANA

Current Principal Place of Business:

ONE SHELL SQUARE
701 POYDRAS ST, #300 PLAZA
NEW ORLEANS, LA 70139 US

New Principal Place of Business:

Current Mailing Address:

ONE SHELL SQUARE
701 POYDRAS ST, #300 PLAZA
NEW ORLEANS, LA 70139 US

New Mailing Address:

FEI Number: 72-0593959

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: V () Delete
Name: KELLY, TIMOTHY E
Address: 1113 DALE ST
City-St-Zip: SLIDELL, LA 70461

Title: PDT () Delete
Name: BRIGHT, EDGAR III
Address: 1010 FALCON AVE
City-St-Zip: METAIRIE, LA 70005

Title: S () Delete
Name: SHEARER, CATHERINE
Address: 701 POYDRAS ST 300 PLAZA
City-St-Zip: NEW ORLEANS, LA 70139

Title: D () Delete
Name: BRIGHT, TIMOTHY P
Address: PO BOX 2497
City-St-Zip: CASHIERS, NC 28717

Title: D (X) Delete
Name: BROWN, RAY W
Address: 1327 EIGHTH STREET
City-St-Zip: NEW ORLEANS, LA 70115

Title: V () Delete
Name: CROW, JOANN
Address: 701 POYDRAS ST #300 PLAZA
City-St-Zip: NEW ORLEANS, LA 70139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: KELLY, TIMOTHY E
Address: 1113 DALE ST
City-St-Zip: SLIDELL, LA 70461

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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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: TIMOTHY E KELLY

V

01/14/2009

Electronic Signature of Signing Officer or Director

Date