2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001299

Entity Name: DREW MORTGAGE ASSOCIATES, INC.

FILED Jan 16, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:		
	ON TURNPIKE BURY, MA 01				
Current N	lailing Addres	ss:	New Mailing Address:		
	ON TURNPIKE BURY, MA 01:				
FEI Number	: 04-3128200	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1201 HAY: TALLAHA:	ATION SERVIC S STREET SSEE, FL 323	01 US			
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Ager			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () RAWAN, BRUC 5 AYSHIRE RD WORCESTER,	ı	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () RAWAN, DOUG 65 LAKE AVEN WORCESTER,	UE #1001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CD () RAWAN, WAYN 59 KINNICUTT WORCESTER,	ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE A. RAWAN PD 01/16/2007