

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F99000005911

FILED
Jan 10, 2006
Secretary of State

Entity Name: PEACHTREE MORTGAGE GROUP, INC.

Current Principal Place of Business:

2455 HOLLYWOOD BLVD #209
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

1250 E. HALLANDALE BEACH BLVD
SUITE 1003
HALLANDALE, FL 33009 US

Current Mailing Address:

2455 HOLLYWOOD BLVD #209
HOLLYWOOD, FL 33020 US

New Mailing Address:

1250 E. HALLANDALE BEACH BLVD
SUITE 1003
HALLANDALE, FL 33009 US

FEI Number: 58-2500239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JANE
200 LESLIE DR
230
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

JONES, JANE
1356 MADISON STREET
HOLLYWOOD, FL 33019 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: JANE JONES

01/10/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, DAVID
Address: 520 SE 5TH AVE #1208
City-St-Zip: FT LAUDERDALE, FL 33302

Title: D () Delete
Name: JANE JONES,
Address: 200 LESLIE DR #230
City-St-Zip: HALLANDALE, FL 33009

Title: PST () Delete
Name: KMETZ, ANN
Address: 25 JY CARMICHAEL RD.
City-St-Zip: NEWMAN, GA 30263

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, DAVID
Address: 1449 SCEPTER COURT N.E.
City-St-Zip: PALM BAY, FL 32905

Title: D (X) Change () Addition
Name: JANE JONES,
Address: 1356 MADISON STREET
City-St-Zip: HOLLYWOOD, FL 33019

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

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: DAVID JONES

D

01/10/2006

Electronic Signature of Signing Officer or Director

Date