2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005911

25 JY CARMICHAEL RD.

NEWMAN, GA 30263

Address: City-St-Zip:

Entity Name: PEACHTREE MORTGAGE GROUP, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
	KLAND PARK BLVD	2740 E OAKLAND PAR	K BLVD	
SUITE 302 FT LAUDE	2 ERDALE, FL 33306 US	SUITE 100 FT LAUDERDALE, FL 3	33306 US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
SUITE 302		2740 E OAKLAND PARI SUITE 100		
FT LAUDE	ERDALE, FL 33306 US	FT LAUDERDALE, FL 3	33306 US	
FEI Number	: 58-2500239 FEI Number Applied Fo	r() FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of Current Registered Ag	ent: Name and Address of	Name and Address of New Registered Agent:	
JONES, JA 3909 NE 2				
7 FT LAUDE	ERDALE, FL 33308 US			
	e named entity submits this statement e of Florida.	for the purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registe	ered Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution	().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete JONES, DAVID 3909 NE 21ST AVE #7 FT LAUDERDALE, FL 33308	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete JANE JONES 3909 NE 21ST AVE #7 FT LAUDERDALE, FL 33308	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	PST () Delete KMETZ, ANN	Title: (Name:) Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JANE JONES D 04/30/2009