2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # K81784

1. Entity Name
EQUITY MORTGAGE GROUP, INC.

Principal Place of Business	Mailing Address
% WILLIAM T. PAPPAS 3632 GALLION RD. JACKSONVILLE, FL 32207	3632 GALLION RD. JACKSONVILLE, FL 32207 US

DO NOT WRITE IN THIS SPACE

02082006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2943096
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PAPPAS, WILLIAM T.
3632 GALLION RD.
JACKSONVILLE, FL 32207

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000430599
02/22/06-80054-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	REMLEY, KENNETH G.
STREET ADDRESS	3532 BOATWRIGHT WAY WEST
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	D
NAME	TYRE, T. ALLEN, JR.
STREET ADDRESS	4309 SHERWOOD RD.
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	D
NAME	PAPPAS, WILLIAM T.
STREET ADDRESS	7853 GROVETON HILLS PLACE
CITY-ST-ZIP	JACKSONVILLE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth Remley 2/8/2006 904-398-6220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #