2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #L29911

1. Entity Name

U.S. MORTGAGE LENDERS, INC.



Principal Place of Business

Mailing Address

4700 MILLENIA BLVD SUITE 175 ORLANDO, FL 32839 5626 RANDOLPH BLVD Suite 2

SUI

SAN ANTONIO, TX 78233



DO NOT WRITE IN THIS SPACE

04092007 No Chg-P

CR2E034 (11/05)

FILED

Apr 13, 2007 08:00 AM Secretary of State

4. FEI Number 58-2075303

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GAUNTT, JENNIFER K 1282 NE BUSINESS PARK PLACE JENSEN BEACH, FL 34957

DO NOT WRITE IN THIS SPACE

021102112				IN I	THIS SPACE
the obligat	ions of registered agent.	urpose of changing its registere	d office or i	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little	fapplicable (NOTE: Registered	Agent signatur	required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AND DIRECT SD KEYES, NANCY 1282 NE BUSINESS PARK PLACE JENSEN BEACH, FL 34957	PTORS			
NAME STREET ADDRESS CITY-ST-ZIP	PD GAUNTT, JENNIFER K 1282 NE BUSINESS PARK PLACE JENSEN BCH, FL 34957				U00000705401 04/23/07-80050-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
NAME • STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS				•	

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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-07

<u> 310 -570-372</u>