2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# M29441

Entity Name: PREMIER MORTGAGE SERVICES, INC.

Current Principal Place of Business:

4617 UNIVERSITY DR.
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

10240 B WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

4617 UNIVERSITY DR.
CORAL SPRINGS, FL 33067 US

New Mailing Address:

10240 B WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 US

FEI Number: 59-2659486 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALOMONE, THOMAS F.
4617 UNIVERSITY DR
CORAL SPRINGS, FL 33067 US

Name and Address of New Registered Agent:

SALOMONE, THOMAS F.
10240 B WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 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: THOMAS F. SALOMONE 04/27/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SALOMONE, THOMAS F.,
Address: 4617 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP ( ) Delete
Name: SALOMONC, MATTHEW
Address: 4617 UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SALOMONE, THOMAS F.,
Address: 10240 B WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP (X) Change ( ) Addition
Name: SALOMONE, MATTHEW
Address: 10240 B WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

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: THOMAS F. SALOMONE DP 04/27/2006
Electronic Signature of Signing Officer or Director Date