2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# N08000002170

Entity Name: FLORIDA ASSOCIATION OF MORTGAGE PROFESSIONALS, INC.

Current Principal Place of Business:

1292 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1292 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GROSVENOR, MELISSA A
1292 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WORKMAN, RITCH
Address: 1292 CEDAR CENTER DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete
Name: LOVE, KATHY R
Address: 1292 CEDAR CENTER DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Delete
Name: PEEK, RICHARD E
Address: 1292 CEDAR CENTER DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WORKMAN, RITCH
Address: 6450 ANDERSON WAY
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change ( ) Addition
Name: PEEK, RICHARD E
Address: 2250 LUCIEN WAY, SUITE 140
City-St-Zip: MAITLAND, FL 32751

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA A. GROSVENOR COO 01/29/2009

Electronic Signature of Signing Officer or Director — Date