

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09514

FILED
Feb 22, 2010
Secretary of State

Entity Name: MORTGAGE BANKERS ASSOCIATION OF FLORIDA

Current Principal Place of Business:

4428 S. LAKE ORLANDO PKWY
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 607826
ORLANDO, FL 32860

New Mailing Address:

FEI Number: 59-1029259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, BRENDA
4428 S. LAKE ORLANDO PKWY
ORLANDO, FL 32808 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: PE
Name: CHLUDZENSKI, JOHN
Address: 7853 GUNN HWY #166
City-St-Zip: TAMPA, FL 33626

Title: VP
Name: LUSSIER, GEORGES
Address: 2033 MAIN STREET, #8408
City-St-Zip: SARASOTA, FL 34237

Title: PD
Name: MAXWELL, SCOTT
Address: 10843 EMERALD CHASE DR.
City-St-Zip: ORLANDO, FL 32836

Title: SVP
Name: HARRISON, DANIEL
Address: 3233 THOMASVILLE RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: P
Name: NELSON, HOWARD
Address: 5600 BEE RIDGE RD.
City-St-Zip: SARASOTA, FL 34233

Title: S/T
Name: MICHAEL, CULBERTSON
Address: 1631 TIMBER EDGE DR.
City-St-Zip: DELAND, FL 32724

I hereby 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 all other like empowered.

SIGNATURE: BRENDA THOMAS

RA

02/22/2010

Electronic Signature of Signing Officer or Director

Date