2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28872

FILED Jan 14, 2005 Secretary of State

Entity Name: MORTGAGE BANKERS ASSOCIATION OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business: 200 WEST FORSYTH STREET 1400 JACKSONVILLE, FL 32202 **New Mailing Address: Current Mailing Address:** 7035 PHILIPS HIGHWAY **SUITE 5-202** JACKSONVILLE, FL 32216 FEI Number: 59-2921763 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, FRANK E 200 WEST FORSYTH STREET, SUITE 1400 JACKSONVILLE, FL 32202 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition STOYER, RICHARD K STAYER, RICHARD K Name: Name: 7215 FINANCIAL WAY Address: 7215 FINANCIAL WAY Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256 Title: () Delete Title: () Change () Addition Name: GALLITZ, SHERRY Name: Address: 320 INY LAKES DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: DVTT () Delete Title: () Change () Addition HILL, ARTHUR Name: Name: 11250 OLD ST. AUGUSTINE RD., #15-25 Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: TC () Delete Title: () Change () Addition WILSON, PERRY L Name: Name: 1300 MARSH LANDING, PKWY., SUITE 107 Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD K. STAYER PRES 01/14/2005