2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002496

FILED Jan 20, 2009 Secretary of State

Entity Name: MORTGAGE BANKERS ASSOCIATION OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1000 TAMIAMI TRAIL NORTH NAPLES, FL 341025481 US **New Mailing Address: Current Mailing Address:** 1000 TAMIAMI TRAIL NORTH NAPLES, FL 341025481 US FEI Number: 59-3434529 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: PILON, JAMES A 1000 N TAMIAMI TRAIL STE 201 NAPLES, FL 34102 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROBBINS, KEVIN Name: Name: 8891 BRIGHTON LANE, SUITE 116 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: Title: () Delete Title: (X) Change () Addition WEAVER, CARIN Name: MERZWEILER, NANCY Name: Address: 1255 CREEKSIDE WAY Address: 3201TAMIAMI TRAIL NORTH, SUITE 201 City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34103 Title: PD() Delete Title: (X) Change () Addition HARPER, MARY HARPER, MARY Name: Name: 1255 CREEKSIDE WAY 1255 CREEKSIDE WAY Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: NAPLES, FL 34108 Title: TD () Delete Title: SD (X) Change () Addition LOLLI, ERICÀ Name: LOLLI, ERICA Name: 2647 PROFESSIONAL CIR., SUITE 1205 2647 PROFESSIONAL CIR., SUITE 1205 Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34119 Title: VPD SD () Delete Title: (X) Change () Addition FAUBION, RAY FAUBION, RAY Name: Name: 3451 BONITA BAY BLVD., UNIT 203 3451 BONITA BAY BLVD., UNIT 203 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: () Delete Title: (X) Change () Addition BUDZYN, THOMAS BUDZYN, THOMAS SR. Name: Name: Address: 3201 TAMIAMI TRAIL NORTH Address: 3201 TAMIAMI TRAIL NORTH NAPLES, FL 34103 NAPLES, FL 34103 City-St-Zip: 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: THOMAS BUDZYN P 01/20/2009