2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000037723

Entity Name: MORTGAGE BANKERS, N.A., INC.

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2030 S OCEAN DR 2030 S OCEAN DRIVE

SUITE 2009 2009

HALLANDALE BEACH, FL 33009 HALLANDALE BEACH, FL 33009

Current Mailing Address: New Mailing Address:

2030 S OCEAN DR 2030 S OCEAN DRIVE

SUITE 2009 2009

HALLANDALE BEACH, FL 33009 HALLANDALE BEACH, FL 33009

FEI Number: 65-0991206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FRASER, CORI D FRASER, CORI D 2030 S OCEAN DRIVE 2030 S OCEAN DR

SUITE 2009 #103

HALLANDALE BEACH, FL 33009 US HALLANDALE BEACH, FL 33009 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: CORI FRASER 02/11/2009

> Electronic Signature of Registered Agent Date

> > Title:

VΡ

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

VΡ

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FRASER, CORI D FRASER, CORI D Name: Name: 2030 S OCEAN DR #103 2030 S OCEAN DR SUITE 2009 Address: Address:

City-St-Zip: HALLANDALE BEACH, FL 33009 City-St-Zip: HALLANDALE BEACH, FL 33009

(X) Change () Addition Name: FRASER, JODIE L Name: FRASER, JODIE L

2030 S OCEAN DR #103 2030 S OCEAN DR SUITE 2009 Address: Address: HALLANDALE BEACH, FL 33009 HALLANDALE BEACH, FL 33009 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORI FRASER PD 02/11/2009