

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091004

Entity Name: MORTGAGE ARCHITECTS INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

3361 ROUSE RD. SUITE 140
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

3361 ROUSE RD. SUITE 140
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 59-3672376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FREZZA, ANTHONY
10924 DEARDEN CIRCLE
ORLANDO, FL 32817 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: VICKERS, JOHN M
Address: 882 LULLWATER DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: VP () Delete
Name: FREZZA, ANTHONY
Address: 10924 DEARDEN CIRCLE
City-St-Zip: ORLANDO, FL 32817

Title: VP (X) Delete
Name: RING, MABEL C
Address: 1017 SHINNECOCK HILLS DRIVE
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN VICKERS

Electronic Signature of Signing Officer or Director

PSTD

01/04/2005

Date