

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091114

Entity Name: C U MORTGAGE CONNECTION, INC.

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

1185 S LANE AVE  
SUITE 1  
JACKSONVILLE, FL 32205

## Current Mailing Address:

1185 S LANE AVE  
SUITE 1  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

11101 OLD ST AUGUSTINE ROAD  
1  
JACKSONVILLE, FL 32257

## New Mailing Address:

11101 OLD ST AUGUSTINE ROAD  
1  
JACKSONVILLE, FL 32257

FEI Number: 59-3675769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, MARSHA P  
1185 S LANE AVE SUITE 1  
JACKSONVILLE, FL 32205 US

## Name and Address of New Registered Agent:

HART, MARSHA P  
11101 OLD ST AUGUSTINE ROAD  
1  
JACKSONVILLE, FL 32257 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: MARSHA P HART

01/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FORD, ELIZABETH S  
Address: 839 PALERMO RD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VD ( ) Delete  
Name: HART, MARSHA P  
Address: 11071 TRALEE CT S  
City-St-Zip: JACKSONVILLE, FL 32221

Title: STD ( ) Delete  
Name: SEYMOUR, SANDRA J  
Address: 1125 CHANDLER OAKS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

## 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 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: MARSHA P HART

VD

01/19/2009

Electronic Signature of Signing Officer or Director

Date