2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097243

Entity Name: THE ROCK MORTGAGE GROUP, INC.

FILED Mar 11, 2006 Secretary of State

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

229 S. TAMIAMI TRAIL
SUITE # 2
VENICE, FL 34285

2149 S. TAMIAMI TRAIL
OSPREY, FL 34229 US

Current Mailing Address: New Mailing Address:

229 S. TAMIAMI TRAIL
SUITE # 2
VENICE, FL 34285

2149 S. TAMIAMI TRAIL
OSPREY, FL 34229 US

FEI Number: 65-1047519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LUDVICEK, GAYL R

1930 HARBORSIDE DRIVE

UNIT #114

LONGBOAT KEY, FL 34228 US

LUDVICEK, GAYL R

22259 CATHERINE AVE.

PORT CHARLOTTE, FL 33952 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: GAYL R LUDVICEK 03/11/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

() Delete

OFFICERS AND DIRECTORS:

Title:

Title: PRES (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:LUDVICEK, GAYL RName:LUDVICEK, GAYL RAddress:1930 HARBOURSIDE DRIVE #114Address:22259 CATHERINE AVE.City-St-Zip:LONGBOAT KEY, FL 34228City-St-Zip:PORT CHARLOTTE, FL 33952

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

Name:LUDVICEK, SAMUEL RName:LUDVICEK, SAMUEL RAddress:1930 HARBOURSIDE DRIVE #114Address:22259 CATHERINE AVE.City-St-Zip:LONGBOAT KEY, FL 34228City-St-Zip:PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the 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: GAYL R LUDVICEK PRES 03/11/2006