

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100811

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: CORINTHIAN MORTGAGE GROUP, INC.

## Current Principal Place of Business:

12525 ORANGE DRIVE  
SUITE 705  
DAVIE, FL 33330

## New Principal Place of Business:

## Current Mailing Address:

12525 ORANGE DRIVE  
SUITE 705  
DAVIE, FL 33330

## New Mailing Address:

P.O. BOX 740343  
BOYNTON BEACH, FL 33474

FEI Number: 65-1050687

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

VALDERRAMA, MARIA  
12525 ORANGE DRIVE  
SUITE 705  
DAVIE, FL 33330 US

## Name and Address of New Registered Agent:

MCCORMICK, EDWARD  
12525 ORANGE DRIVE  
SUITE 705  
DAVIE, FL 33330 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: EDWARD MCCORMICK

03/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VALDERRAMA, VANESSA  
Address: 12525 ORANGE DRIVE SUITE 705  
City-St-Zip: DAVIE, FL 33330

Title: VP (X) Delete  
Name: VALDERRAMA, MARIA  
Address: 12525 ORANGE DRIVE SUITE 705  
City-St-Zip: DAVIE, FL 33330

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CIVIT-LEMOLI, KARIN C  
Address: 12525 ORANGE DRIVE SUITE 705  
City-St-Zip: DAVIE, FL 33330

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 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: KARIN C. CIVIT-LEMOLI

PRES

03/28/2006

Electronic Signature of Signing Officer or Director

Date