

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117098

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: UNITED INTERNATIONAL MORTGAGE CORPORATION

**Current Principal Place of Business:**

3 EAST MAIN STREET  
BUFORD, GA 30518

**New Principal Place of Business:**

**Current Mailing Address:**

3 EAST MAIN STREET  
BUFORD, GA 30518

**New Mailing Address:**

FEI Number: 59-3697169      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: WILLIAMS, AMY  
Address: 2770 GRAVEL SPRINGS ROAD  
City-St-Zip: BUFORD, GA 30519

Title: V ( ) Delete  
Name: LONG, LAURIE  
Address: 883 CAMBRON COMMONS DRIVE  
City-St-Zip: SUWANNEE, GA 30024

Title: V ( ) Delete  
Name: WILLIAMS, KEVIN R  
Address: 2615 OLD IVY COURT  
City-St-Zip: BUFORD, GA 30519

Title: V ( ) Delete  
Name: WILLIAMS, DUSTIN C  
Address: 1827 FORT RIVER WAY  
City-St-Zip: DACULA, GA 30019

Title: ST ( ) Delete  
Name: BROWN, CHRISTOPHER W  
Address: 4025 INMAN PARK LANE  
City-St-Zip: BUFORD, GA 30519

**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:

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: DUSTIN C. WILLIAMS

V

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date