

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033561

FILED
May 05, 2006
Secretary of State

Entity Name: CITIZEN MORTGAGE PROFESSIONALS, INC.

Current Principal Place of Business:

8843 -1 SAN JOSE BLVD.
JACKSONVILLE, FL 32217

New Principal Place of Business:

11437 CENTRAL PARKWAY
SUITE 102
JACKSONVILLE, FL 32224

Current Mailing Address:

8843 -1 SAN JOSE BLVD.
JACKSONVILLE, FL 32217

New Mailing Address:

11437 CENTRAL PARKWAY
SUITE 102
JACKSONVILLE, FL 32224

FEI Number: 59-3710054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARSALLA, TAREQ
8843 -1 SAN JOSE BLVD.
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

ARSALLA, TAREQ
11437 CENTRAL PARKWAY
SUITE 102
JACKSONVILLE, FL 32224 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:

05/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARSALLA, TAREQ
Address: 8843-1 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

Title: S () Delete
Name: ARSALLA, DONNA
Address: 8843-1 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARSALLA, TAREQ
Address: 11437 CENTRAL PARKWAY #102
City-St-Zip: JACKSONVILLE, FL 32224

Title: S (X) Change () Addition
Name: ARSALLA, DONNA
Address: 11437 CENTRAL PARKWAY #102
City-St-Zip: JACKSONVILLE, FL 32224

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: TAREQ ARSALLA

PRES

05/05/2006

Electronic Signature of Signing Officer or Director

Date