2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# P01000050222

Entity Name: TROPICAL DAUPHIN MORTGAGE COMPANY

Current Principal Place of Business:

908 SCENIC HWY
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

PO BOX 3198
WINTER HAVEN, FL 338853198

New Mailing Address:

FEI Number: 59-3732481 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAUPHIN, ANN B
908 SCENIC HWY
HAINES CITY, FL 33844 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: D ( ) Delete
Name: DAUPHIN, ANN B
Address: 445 EAST THELMA STREET
City-St-Zip: LAKE ALFRED, FL 33850

Title: ADM ( ) Delete
Name: FEQUIERE, JOANES L
Address: 315 SOUTH ILAKEE AVENUE
City-St-Zip: LAKE ALFRED, FL 33850

Title: OFFI ( ) Delete
Name: EUGENE, JACQUES P
Address: 6456 NEW GOLDEN ROD #C
City-St-Zip: ORLANDO, FL 32818 OR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DAUPHIN, ANN B
Address: P.O.BOX 3198
City-St-Zip: WINTER HAVEN, FL 33885

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: JOANES L. FEQUIERE ADM 04/28/2008

Electronic Signature of Signing Officer or Director — Date