

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054997

Entity Name: GOOD FAITH MORTGAGE, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

2620 STATE ROAD 590, UNIT C
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

2620 STATE ROAD 590, UNIT C
CLEARWATER, FL 33759

New Mailing Address:

1218 JOHN B WHITE SR BLVD
STE H
SPARTANBURG, SC 29306

FEI Number: 59-3725613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAULSEN, DAVID F ESQ
2450 SUNSET POINT ROAD
CLEARWATER, FL 33765 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: PD () Delete
Name: BYARS, JAMES L JR
Address: 2620 SR 590 UNIT C
City-St-Zip: CLEARWATER, FL 33759

Title: S/T () Delete
Name: BYARS, JAMES L III
Address: 3251 LANDMARK DR. STE. 140
City-St-Zip: NORTH CHARLESTON, SC 29418

Title: TR () Delete
Name: JOHNSON, JULIA B
Address: 100 DOGWOOD DRIVE
City-St-Zip: LYMAN, SC 29365

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S/T (X) Change () Addition
Name: BYARS, JAMES L III
Address: 3255 LANDMARK DR. STE. 103
City-St-Zip: NORTH CHARLESTON, SC 29418

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: JAMES L BYARS JR

PRES

02/24/2009

Electronic Signature of Signing Officer or Director

Date