

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000057366

FILED
Apr 21, 2005
Secretary of State

Entity Name: DEARBORN MORTGAGE CORP.

Current Principal Place of Business:

4630 SOUTH KIRKMAN ROAD
SUITE 178
ORLANDO, FL 32811 US

New Principal Place of Business:

6588 GROSVENOR LANE
ORLANDO, FL 32835 US

Current Mailing Address:

4630 SOUTH KIRKMAN ROAD
SUITE 178
ORLANDO, FL 32811 US

New Mailing Address:

6588 GROSVENOR LANE
ORLANDO, FL 32835 US

FEI Number: 59-3724153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRD, SARAH A
6588 GROSVENOR LANE
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

BIRD, SARAH A
6588 GROSVENOR LANE
202
ORLANDO, FL 32835 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:

04/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P T () Delete
Name: BIRD, SAMUEL
Address: 4630 SOUTH KIRKMAN ROAD, SUITE 178
City-St-Zip: ORLANDO, FL 32811 US

Title: V () Delete
Name: BIRD, TRACY A
Address: 4630 SOUTH KIRKMAN ROAD, SUITE 178
City-St-Zip: ORLANDO, FL 32811 US

Title: S () Delete
Name: BIRD, SAMUEL III
Address: 4630 SOUTH KIRKMAN ROAD
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P T (X) Change () Addition
Name: BIRD, SAMUEL
Address: 6588 GROSVENOR LANE
City-St-Zip: ORLANDO, FL 32835 US

Title: V (X) Change () Addition
Name: BIRD, TRACY A
Address: 6588 GROSVENOR LANE
City-St-Zip: ORLANDO, FL 32835 US

Title: S (X) Change () Addition
Name: BIRD, SAMUEL III
Address: 6588 GROSVENOR LANE
City-St-Zip: ORLANDO, FL 32835 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAMUEL BIRD

P

04/21/2005

Electronic Signature of Signing Officer or Director

Date