

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000069091

FILED
Apr 29, 2008
Secretary of State

Entity Name: PROFESSIONAL MORTGAGE CENTER, INC.

Current Principal Place of Business:

2434 SAND MINE ROAD
DAVENPORT, FL 33837

New Principal Place of Business:

Current Mailing Address:

920 MAIN STREET
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 59-3732329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, MARK L
920 MAIN STREET
WINDERMERE, FL 34786 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: ALLEN, MARK L
Address: 920 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: ALLEN, ANNE M
Address: 920 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: ALLEN, MATTHEW W
Address: 10816 BOCA POINTE DR
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, MARK L
Address: 920 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

Title: ST (X) Change () Addition
Name: ALLEN, ANNE M
Address: 920 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

Title: VP (X) Change () Addition
Name: ALLEN, MATTHEW W
Address: 10816 BOCA POINTE DR
City-St-Zip: ORLANDO, FL 32836

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: ANNE M ALLEN

ST

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date