

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082273

**FILED**  
**May 08, 2007**  
**Secretary of State**

**Entity Name:** ACTION MORTGAGE GROUP, INC.

**Current Principal Place of Business:**

1500 COLONIAL BLVD  
SUITE 102  
FORT MYERS, FL 33907

**New Principal Place of Business:**

16481 MILLSTONE CIRCLE  
SUITE 201  
FORT MYERS, FL 33908

**Current Mailing Address:**

1500 COLONIAL BLVD  
SUITE 102  
FORT MYERS, FL 33907

**New Mailing Address:**

16481 MILLSTONE CIRCLE  
SUITE 201  
FORT MYERS, FL 33908

**FEI Number:** 65-1123520

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ANTONIC, GLENN P  
1500 COLONIAL BLVD.  
SUITE 102  
FORT MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

ANTONIC, GLENN P  
16481 MILLSTONE CIRCLE  
SUITE 201  
FORT MYERS, FL 33908 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: \_\_\_\_\_

05/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: ANTONIC, ROSELLE  
Address: 1500 COLONIAL BLVD. STE.102  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: ANTONIC, ROSELLE  
Address: 16481 MILLSTONE CIRCLE #201  
City-St-Zip: FORT MYERS, FL 33908

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: GLENN ANTONIC

PRES

05/08/2007

Electronic Signature of Signing Officer or Director

Date