

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 19, 2007 8:00 am
Secretary of State**

04-19-2007 90418 028 ***150.00

DOCUMENT # P01000103179

1. Entity Name
U.S. MORTGAGE REDUCTION, INC.



Principal Place of Business
4700 MILLENIUM BLVD
SUITE X 175
SAN ANTONIO, TX 78233
ORLANDO FL 32839

Mailing Address
5626 RANDOLPH BLVD
SUITE 2
SAN ANTONIO, TX 78233



DO NOT WRITE IN THIS SPACE

04092007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0332258	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent.

KEYES, NANCY
1282 NE BUSINESS PARK PLACE
JENSEN BEACH, FL 34957

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GAUNTT, JENNIFER K
STREET ADDRESS 1282 NE BUSINESS PARK PLACE
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE SD
NAME KEYES, NANCY
STREET ADDRESS 1282 NE BUSINESS PARK PLACE
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Nancy Keyes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-907 210-540-3720

Date

Daytime Phone #