

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000082438

FILED
May 08, 2009
Secretary of State

Entity Name: ACCESS MORTGAGE HOLDING CORPORATION, INC.

Current Principal Place of Business:

800 CHOCTAW LANE
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

PO BOX 217
SHALIMAR, FL 325790217 US

New Mailing Address:

FEI Number: 54-2072746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, ROBERT L JR
800 CHOCTAW LANE
SHALIMAR, FL 32579 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

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: D () Delete
Name: BROWN, ROBERT L JR
Address: 11 RACETRACK ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S () Delete
Name: LAWRENCE, KAREN E
Address: 4570 SCARLET DRIVE
City-St-Zip: CRESTVIEW, FL 32539

Title: VP (X) Delete
Name: SAUNDERS, MIA
Address: 419 CHRISTOPHER DRIVE
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROWN, ROBERT L JR
Address: 800 CHOCTAW LANE
City-St-Zip: SHALIMAR, FL 32579

Title: S (X) Change () Addition
Name: BROWN, ROBERT L
Address: 800 CHOCTAW LANE
City-St-Zip: SHALIMAR, FL 32579

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: ROBERT L BROWN, JR

D

05/08/2009

Electronic Signature of Signing Officer or Director

Date