2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108831

Entity Name: MONTANA MORTGAGE COMPANY

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12369 TIGER CREEK 12369 TIGER CREEK LN JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

12369 TIGER CREEK 12369 TIGER CREEK LN JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

FEI Number: 74-3047760 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MACKY, PITTMAN PITTMAN, MACKY
12369 TIGER CREEK 12369 TIGER CREEK LN
JACKSONVILLE, FL 32225 US JACKSONVILLE, FL 32225 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: MACKY PITTMAN 05/01/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS () Delete Title: PDS (X) Change () Addition Name: PITTMAN, MACKY Name: PITTMAN, MACKY

Address: BOX 351269 Address: 12369 TIGER CREEK LN
City-St-Zip: JACKSONVILLE, FL 32225 US City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VDT () Delete Title: VDT (X) Change () Addition

Name: PITTMAN, ANN Name: PITTMAN, ANN

Address: BOX 351269 Address: 12369 TIGER CREEK LN City-St-Zip: JACKSONVILLE, FL 32225 US City-St-Zip: JACKSONVILLE, FL 32225 US

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: MACKY PITTMAN PDS 05/01/2009