

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008251

FILED  
May 11, 2004  
Secretary of State

Entity Name: YOUR MORTGAGE SOURCE, INC.

## Current Principal Place of Business:

4401 FALLBROOK BLVD.  
PALM HARBOR, FL 34685

## New Principal Place of Business:

29399 U.S. 19 N  
SUITE #365  
CLEARWATER, FL 33761

## Current Mailing Address:

4401 FALLBROOK BLVD.  
PALM HARBOR, FL 34685

## New Mailing Address:

29399 U.S. 19 N  
SUITE #365  
CLEARWATER, FL 33761

FEI Number: 33-1040752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOX, GREGORY A  
28050 U.S. 19 NORTH  
CLEARWATER, FL 33761 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: CRAWFORD, MARLENE  
Address: 2905 EAGLE ESTATE CIRCLE S.  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: ROONEY, JOANN  
Address: 4401 FALLBROOK BLVD.  
City-St-Zip: PALM HARBOR, FL 34685

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CRAWFORD, MARLENE  
Address: 2968 HEATHER TR.  
City-St-Zip: CLEARWATER, FL 33761

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARLENE CRAWFORD

MRS

05/11/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date