2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008251

Entity Name: YOUR MORTGAGE SOURCE, INC.

4401 FALLBROOK BLVD.

PALM HARBOR, FL 34685

Address:

City-St-Zip:

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 29399 U.S. 19 N **SUITE #365** CLEARWATER, FL 33761 **New Mailing Address: Current 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: Name and Address of New Registered Agent: FOX, GREGORY A 28050 U.S. 19 NORTH CLEARWATER, FL 33761 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CRAWFORD, MARLENE Name: Name: 2968 HEATHER TR. Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROONEY, JOANN ROONEY, JOANN Name: Name:

Address:

City-St-Zip:

3973 MIMOSA PLACE

PALM HARBOR, FL 34685

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 01/05/2005