2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036990

Entity Name: PRESCOTT MORTGAGE, INC.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2375-102 ST. JOHNS BLUFF RD. SOUTH 2375 ST. JOHNS BLUFF RD. SOUTH JACKSONVILLE, FL 32246

SUITE 106

JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

2375 ST. JOHNS BLUFF RD. SOUTH 2375-102 ST. JOHNS BLUFF RD. SOUTH

SUITE 106 JACKSONVILLE, FL 32246 US

JACKSONVILLE, FL 32246

FEI Number: 16-1635785 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARTE, LAURA CARTE, LAURA 1227 MÚRRAY DRIVE 3933 EŃGLISH COLONY DRIVE SOUTH

JACKSONVILLE, FL 32205 US JACKSONVILLE, FL 32256

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: 05/01/2006

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

KOTAR, JASON Name: Name: KOTAR, JASON

2375-102 ST. JOHNS BLUFF RD. SOUTH Address: 2375-106 ST. JOHNS BLUFF RD. SOUTH Address:

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

VD Title: VD Title: () Delete (X) Change () Addition Name:

MOSER, CHERI L Name: MOSER, CHERI L

2375-102 ST. JOHNS BLUFF RD. SOUTH 2375-106 ST. JOHNS BLUFF RD. SOUTH Address: Address:

JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246 City-St-Zip: City-St-Zip:

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

MOSER, LOWELL Name: MOSER, LOWELL Name:

2375-102 ST. JOHNS BLUFF RD. SOUTH Address: 2375-106 ST. JOHNS BLUFF RD. SOUTH Address:

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON KOTAR PD 05/01/2006