2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124795

Name:

Address:

City-St-Zip:

Entity Name: RE-SOURCE CAPITAL MORTGAGE. INC

FILED Apr 24, 2006 Secretary of State

Entity Nar	me: RE-SOUR	CE CAPITAL MORTGAGE	E, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
3015 HARTLEY ROAD SUITE 8 BOX 8 JACKSONVILLE, FL 32257				200 BUSINESS PARK CIRCLE SUITE 106 SAINT AUGUSTINE, FL 32095			
Current Mailing Address:				New Mailing Address:			
SUITE 8 B	TLEY ROAD OX 8 VILLE, FL 322	57	5	SUITE 106	ESS PARK BUSTINE, F		
FEI Number:	71-0955753	FEI Number Applied For ()	FEI Numb	er Not Appli	cable ()	Certificate of Status Des	ired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
8875 HIDD TAMPA, FI The above	L 336372087 (RKWAY SUITE 300	ne purpose of (changing it	s registered	office or registered ager	nt, or both,
SIGNATU		ic Signature of Registered	A mant			Data	
Election Car		Trust Fund Contribution ().	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () WILLIAMS, WIL 1000 EAGLE PO ST AUGUSTINE	DINT DRIVE	۸ م	ītle: lame: lddress: Dity-St-Zip:	WILLIAMS, V 139 SOUTH I	(X) Change()Addition VILLIAM END STREET NE, FL 32095	
Title: Name: Address: City-St-Zip:	S () RAFFERTY, MIC 1757 SOUTHCR JACKSONVILLE	EEK DR	۸ م	Title: Name: Address: Dity-St-Zip:		() Change () Addition	
Title:	()	Delete	Т	ītle:	VP	() Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

FLANAGAN, DARRIN

1929 BARHAM COURT

JACKSONVILLE, FL 32259

SIGNATURE: WILLIAM M. WILLIAMS JR. PRES 04/24/2006