2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124795

Entity Name: RE-SOURCE CAPITAL MORTGAGE, INC.

FILED Apr 29, 2011 Secretary of State

	Current Principal Place of Business:	New Principal Place of Business
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701 MARKET STREET 139 SOUTH END STREET SUITE 106B SUITE 106B

SAINT AUGUSTINE, FL 32095 SAINT AUGUSTINE, FL 32095

Current Mailing Address: New Mailing Address:

701 MARKET STREET
SUITE 106B
SAINT AUGUSTINE, FL 32095
SAINT AUGUSTINE, FL 32095
SAINT AUGUSTINE, FL 32095
SAINT AUGUSTINE, FL 32095

FEI Number: 71-0955753 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:

FLORIDA INCORPORATORS, INC. 8875 HIDDEN RIVER PARKWAY SUITE 300 TAMPA, FL 336372087 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

OFFICERS AND DIRECTORS:

Title: [

Name: WILLIAMS, WILLIAM
Address: 139 SOUTH END STREET
City-St-Zip: ST AUGUSTINE, FL 32095

Title: S

Name: RAFFERTY, MICHAEL F Address: 1757 SOUTHCREEK DR City-St-Zip: JACKSONVILLE, FL 32259

Title: P

Name: DAVIS, MARCUS F

Address: 10550 BAYMEADOWS ROAD City-St-Zip: JACKSONVILLE, FL 32256

Title: 7

Name: PERALES, ARLENE

Address: 10550 BAYMEADOWS ROAD City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM M WILLIAMS JR D 04/29/2011