2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039153

Name:

Address: City-St-Zip: GLENNON, JULIE A

HOLMES BEACH, FL 34217

502 70TH ST

Entity Name: APAC MORTGAGE COMPANY, INC.

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 24001 STATE ROAD 64 MYAKKA CITY, FL 34251 **Current Mailing Address: New Mailing Address:** 24001 STATE ROAD 64 MYAKKA CITY, FL 34251 FEI Number: 20-0831168 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: GLENNON, JULIE A 410 CORTÉZ RD., STE. 112 BRADENTON, FL 34207 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: PRES () Delete Title: () Change () Addition GLENNON, JULIE A Name: Name: 502 70TH ST Address: Address: City-St-Zip: HOLMES BEACH, FL 34217 City-St-Zip: V.P. Title: Title: () Delete () Change () Addition Name: GLENNON, JOHN A Name: 3620 63RD ST WEST Address: Address: BRADENTON, FL 34209 City-St-Zip: City-St-Zip: () Delete Title: Title: VΡ () Change () Addition GLENNON, WILLIAM H Name: Name: 502 70TH ST Address: Address: City-St-Zip: HOLMES BEACH, FL 34217 City-St-Zip: Title: SEC () Delete Title: () Change () Addition GLENNON, JOHN A Name: Name: Address: 3620 63RD ST WEST Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: Title: TRES Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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:

SIGNATURE: JULIE A GLENNON PRES 04/24/2009