2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008
Secretary of State

DOCUMENT# P05000012610

Entity Name: ALL MORTGAGE SOLUTIONS FAMILY, INC.

Current Principal Place of Business:

4721 E. HWY 100
SUITE 106
BUNNELL, FL 32110 US

New Principal Place of Business:

4750 E. HWY 100
SUITE 232
BUNNELL, FL 32110 US

Current Mailing Address:

4721 E. HWY 100
SUITE 106
BUNNELL, FL 32110 US

New Mailing Address:

4750 E. HWY 100
SUITE 232
BUNNELL, FL 32110 US

FEI Number: 20-2231294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEONARD, CATHERINE M P
4721 EAST HWY 100
SUITE 106
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

LEONARD, CATHERINE M P
4750 EAST HWY 100
SUITE 232
BUNNELL, FL 32110 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: CATHERINE M. LEONARD 04/03/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEONARD, CATHERINE
Address: 4721 EAST HWY 100, ST 106
City-St-Zip: BUNNELL, FL 32110 US

Title: VP ( ) Delete
Name: LEONARD, LEO
Address: 4721 EAST HWY 100, ST 106
City-St-Zip: BUNNELL, FL 32110 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEONARD, CATHERINE
Address: 4750 EAST HWY 100, ST 232
City-St-Zip: BUNNELL, FL 32110 US

Title: VP (X) Change ( ) Addition
Name: LEONARD, LEO
Address: 4750 EAST HWY 100, ST 232
City-St-Zip: BUNNELL, FL 32110 US

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.

SIGNATURE: CATHERINE M. LEONARD PRES 04/03/2008
Electronic Signature of Signing Officer or Director Date