## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000012610

Entity Name: ALL MORTGAGE SOLUTIONS FAMILY, INC.

FILED Sep 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4750 E. HWY 100 4601 E. HWY 100 SUITE 232 SUITE E4

BUNNELL, FL 32110 US BUNNELL, FL 32110 US

Current Mailing Address: New Mailing Address:

4750 E. HWY 100 4601 E. HWY 100 SUITE 232 SUITE E4

BUNNELL, FL 32110 US 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: Name and Address of New Registered Agent:

LEONARD, CATHERINE M P
4750 EAST HWY 100
SUITE 232
BUNNELL, FL 32110 US

LEONARD, CATHERINE M P
4601 EAST HWY 100
SUITE E4
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: 09/01/2009

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:

 Title:
 P
 ( ) Delete

 Name:
 LEONARD, CATHERINE

 Address:
 4750 EAST HWY 100, ST 232

 City-St-Zip:
 BUNNELL, FL 32110 US

Title: VP ( ) Delete Name: LEONARD, LEO

Address: 4750 EAST HWY 100, ST 232 City-St-Zip: BUNNELL, FL 32110 US ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEONARD, CATHERINE
Address: 4601 EAST HWY 100, ST E4
City-St-Zip: BUNNELL, FL 32110 US

Title: VP (X) Change () Addition

Name: LEONARD, LEO

Address: 4601 EAST HWY 100, ST E4 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 P 09/01/2009