


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 17, 2006 8:00 am
Secretary of State

03-02-2006 90007 047 ***150.00

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DOCUMENT # P05000062140	
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1. Entity Name
ASSURED MORTGAGES OF CENTRAL FLORIDA, INC.

Principal Place of Business
1194 CHESSINGTON CIRCLE
HEATHROW, FL 32746-1911 US

Mailing Address
1194 CHESSINGTON CIRCLE
HEATHROW, FL 32746-1911 US

2. Principal Place of Business 540 E HORATIO AVE Suite, Apt. #, etc. SUITE 200 City & State MAITLAND FL Zip 32751 Country ORANGE	3. Mailing Address 540 E HORATIO AVE Suite, Apt. #, etc. SUITE 200 City & State MAITLAND FL Zip 32751 Country ORANGE
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02282006 Chg-P CR2E034 (11/05)

4. FEI Number 202826588	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GRIM, WILLIAM T III
1194 CHESSINGTON CIRCLE
HEATHROW, FL 32746-1911

7. Name and Address of New Registered Agent

Name JASON ZINNO
Street Address (P.O. Box Number is Not Acceptable)
540 E HORATIO AVE
SUITE 200
City MAITLAND FL Zip Code 32751

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE William T Grim JASON ZINNO 2/28/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.S GRIM, WILLIAM T III 1194 CHESSINGTON CIRCLE HEATHROW, FL 327461911 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, T GRIM, THOMAS E 436 EAST CHURCH STREET DELAND, FL 327244311 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAM T GRIM III 1194 CHESSINGTON CIR HEATHROW FL 327461911 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KIRK ANDERSON 540 E HORATIO SUITE 100 MAITLAND FL 32751 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ST JASON ZINNO 540 E HORATIO SUITE 100 MAITLAND FL 32751 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRENT DEHOOP 400 AVILA CT WINTER SPRINGS FL 32789 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KEVIN BONDREUX 336 PRINCETON ST WTB ORL FL 32804 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON ZINNO PRES 2/28/06 4074675631
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SEE ATTACHMENT FOR OFFICERS

SEE ATTACHED SHEET

ATTACHMENT

66010427
#705000062140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

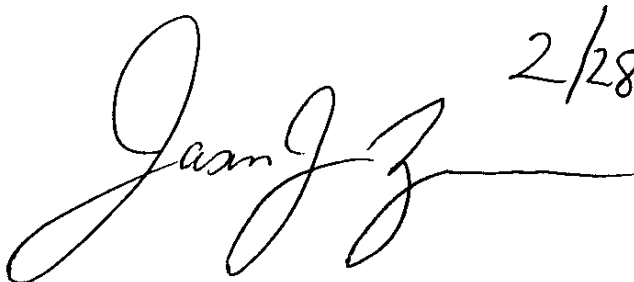
JASON J ZINNO PRESIDENT/S/T
540 E HORATIO SUITE 100
MAITLAND FL 32708

KEVIN BOUDREAUZ VICE PRESIDENT
336 PRICETON ST UNIT B
ORL FL 32804

BRENT DEHOOP VICE PRESIDENT
400 AVILA CT
WINTER SPRINGS FL 32708

WILLIAM T GRIM III DELETE
1194 CHESSINGTON CIR
HEATHROW FL 32746

THOMAS E GRIM DELETE
436 EAST CHURCH ST
DELAND FL 32724

 2/28/06

ATTACHMENT 66010427

#P05000002140

Form **2553**

(Rev. March 2005)

Department of the Treasury
Internal Revenue Service**Election by a Small Business Corporation**

(Under section 1362 of the Internal Revenue Code)

▶ See Parts II and III on back and the separate instructions.

OMB No. 1545-0146

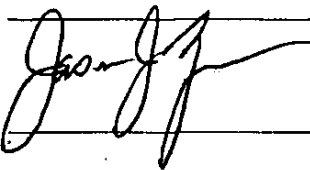

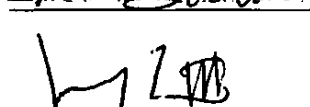
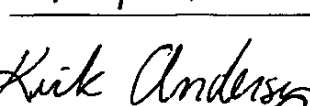
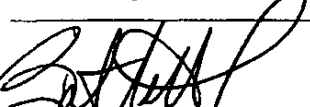
▶ The corporation may either send or fax this form to the IRS. See page 2 of the instructions.

- Notes: 1. Do not file Form 1120S, U.S. Income Tax Return for an S Corporation, for any tax year before the year the election takes effect.
2. This election to be an S corporation can be accepted only if all the tests are met under Who May Elect on page 1 of the instructions; all shareholders have signed the consent statement; an officer has signed this form; and the exact name and address of the corporation and other required form information are provided.

Part I Election Information

Please Type or Print	Name (see instructions)	A Employer identification number
	ASSURED MORTGAGES OF CENTRAL FL INC	20 2826580
	Number, street, and room or suite no. (If a P.O. box, see instructions.)	B Date incorporated
	540 E NORATHO SUITE 202	04/27/2005
	City or town, state, and ZIP code	C State of incorporation
	MAITLAND FL 32751	FL
D Check the applicable box(es) if the corporation, after applying for the EIN shown in A above, changed its name <input type="checkbox"/> or address <input type="checkbox"/>		
E Election is to be effective for tax year beginning (month, day, year) ▶ 01/01/2005		
F Name and title of officer or legal representative who the IRS may call for more information		G Telephone number of officer or legal representative
JASON J ZINNO PRESIDENT		(407) 1467-5631
H If this election takes effect for the first tax year the corporation exists, enter month, day, and year of the earliest of the following: (1) date the corporation first had shareholders, (2) date the corporation first had assets, or (3) date the corporation began doing business ▶ 04/27/2005		
I Selected tax year: Annual return will be filed for tax year ending (month and day) ▶ 12/31		

If the tax year ends on any date other than December 31, except for a 52-53-week tax year ending with reference to the month of December, complete Part II on the back. If the date you enter is the ending date of a 52-53-week tax year, write "52-53-week year" to the right of the date.

J Name and address of each shareholder or former shareholder required to consent to the election. (See the instructions for column K)	K Shareholders' Consent Statement Under penalties of perjury, we declare that we consent to the election of the above-named corporation to be an S corporation under section 1362(a) and that we have examined this consent statement, including accompanying schedules and statements, and to the best of our knowledge and belief, it is true, correct, and complete. We understand our consent is binding and may not be withdrawn after the corporation has made a valid election. (Sign and date below.)		L Stock owned or percentage of ownership (see instructions)		M Social security number or employer identification number (see instructions)	N Shareholder's tax year ends (month and day)
	Signature	Date	Number of shares or percentage of ownership	Date(s) acquired		
 JASON ZINNO 612 TINA LN WINTER SPRINGS FL 32788	 KEVIN BRODEUR 336 PRINCETON ST UNIT B ORLANDO FL 32804	12/12/05	33.5%	1/1/06	264-674928	
 WILLIAM T GROM III 1194 CHESINGTON HEATHRON FL 32746	 KIRK ANDERSEN VP	12/12/05	11%	1/1/06	592-05-0321	
 BRENT DEHOOP VP		12/12/05	11%	1/1/06	591-969052	
					472-86-1031	

Under penalties of perjury, I declare that I have examined this election, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer ▶  Title ▶ PRESIDENT Date ▶ 12/7/05