

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000101305

FILED  
Apr 04, 2006  
Secretary of State

Entity Name: ORLANDO MORTGAGE BROKERS, INC.

## Current Principal Place of Business:

3118 CRANE'S COVE LOOP  
KISSIMMEE, FL 34741

## New Principal Place of Business:

2715 BARTLET DRIVE  
KISSIMMEE, FL 34741

## Current Mailing Address:

3118 CRANE'S COVE LOOP  
KISSIMMEE, FL 34741

## New Mailing Address:

2715 BARTLET DRIVE  
KISSIMMEE, FL 34741

FEI Number: 01-0840276

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, KARLA  
3118 CRANE'S COVE LOOP  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

ROBINSON, KARLA  
2715 BARTLET DRIVE  
KISSIMMEE, FL 34741 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: KARLA ROBINSON

04/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: ROBINSON, KARLA  
Address: 3118 CRANES COVE LOOP  
City-St-Zip: KISSIMMEE, FL 34741

Title: VP ( ) Delete  
Name: ROBINSON, KEVIN  
Address: 3118 CRANES COVE LOOP  
City-St-Zip: KISSIMMEE, FL 34741

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ROBINSON, KARLA  
Address: 2715 BARTLET DRIVE  
City-St-Zip: KISSIMMEE, FL 34741

Title: VP (X) Change ( ) Addition  
Name: ROBINSON, KEVIN  
Address: 2715 BARTLET DRIVE  
City-St-Zip: KISSIMMEE, FL 34741

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

PRES

04/04/2006

Electronic Signature of Signing Officer or Director

Date