2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000145363

Entity Name: APEX MORTGAGE & INVESTMENT INC.

FILED Apr 07, 2008 Secretary of State

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

102 S. MAIN ST.

CRESCENT CITY, FL 32112

Current Mailing Address: New Mailing Address:

102 S. MAIN ST CRESCENT CITY, FL 32112 PALATKA, FL 32178

FEI Number: 20-3792204 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:

SCHOLL, BARBARA M

102 S. MAIN ST

CRESCENT CITY, FL 32112 US

HARRISON, DAVID A
379 CHENEY HIGHWAY
#210
TITUSVILLE, FL 32780 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.

City-St-Zip:

SIGNATURE: DAVID A HARRISON 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition Name: SCHOLL, BARBARA M Name: SCHOLL, BARBARA M Address: 102 S. MAIN ST. Address: POST OFFICE BOX 1223

 102 S. MAIN ST.
 Address:
 POST OFFICE BOX 1223

 CRESCENT CITY, FL 32112
 City-St-Zip:
 PALATKA, FL 32178

 Title:
 VSD
 () Delete
 Title:
 VSD
 (X) Change () Addition

 Name:
 MCKINNON, GARY F SR.
 Name:
 MCKINNON, GARY F SR.

Address: 102 S. MAIN ST. Address: POST OFFICE BOX 1223
City-St-Zip: CRESCENT CITY, FL 32112 City-St-Zip: PALATKA, FL 32178

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: BARBARA SCHOLL PTD 04/07/2008