2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164846

Entity Name: MORTGAGE ASSOCIATES OF SARASOTA, INC.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Clirrent Principal Place of Kilciness	NOW Principal Place of Bilgings

1111 N. GULF STREAM AVE. 2063 MAIN STREET

100

SARASOTA, FL 34236 SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

2063 MAIN STREET 1111 N. GULF STREAM AVE.

100 SARASOTA, FL 34236

SARASOTA, FL 34237

FEI Number: 20-3999753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ULREY, TOMMIE N ULREY, TOMMIE N 1111 N. GULF STREAM AVE. 2063 MAIN STREET

SARASOTA, FL 34236 US SARASOTA, FL 34237 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: 04/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

ULREY, TOMMIE N ULREY, TOMMIE N Name: Name:

1111 N. GULF STREAM AVE., #9-C 435 S. GULF STREAM, UNIT 503 Address: Address:

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

Title: VΡ () Delete Title: VP/S (X) Change () Addition

THOMAS, JEANINE R Name: THOMAS, JEANINE R Name: 12008 SLOUGH RIM RD. Address: 12008 SLOUGH RIM RD. Address: SARASOTA, FL 34240 SARASOTA, FL 34240 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: TOMMIE N. ULREY 04/14/2008