2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000005721

Entity Name: MILLENNIUM MORTGAGE MARKETING, INC.

FILED Apr 30, 2008 Secretary of State

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

C/O 20 SW 27TH AVENUE C/O 8434 NW 57TH DRIVE

SUITE 103 CORAL SPRINGS, FL 33067 US POMPANO BEACH, FL 33069 US

New Mailing Address: Current Mailing Address:

C/O 20 SW 27TH AVENUE C/O 8434 NW 57TH DRIVE

SUITE 103 CORAL SPRINGS, FL 33067 US POMPANO BEACH, FL 33069 US

FEI Number: 20-4117691 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:

SENNER, SAMUEL J SENNER, SAMUEL J C/O 20 SW 27TH AVENUE 8434 NW 57TH DRIVE US

CORAL SPRINGS, FL 33067 SUITE 103 POMPANO BEACH, FL 33069 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: SAMUEL J. SENNER 04/30/2008

> 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 SENNER, SAMUEL J SENNER, SAMUEL J Name: Name:

C/O 20 SW 27TH AVENUE 8434 NW 57TH DRIVE Address: Address:

City-St-Zip: POMPANO BEACH, FL 33069 US City-St-Zip: CORAL SPRINGS, FL 33967 US

Title: DVPT () Delete Title: () Change () Addition Name: BROFERMAKER, CHAD M Name: 6645 HOLLANDAIRE DRIVE WEST Address: Address: BOCA RATON, FL 33433 US 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.

SIGNATURE: SAMUEL J. SENNER **DPS** 04/30/2008