

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050390

FILED
Aug 14, 2007
Secretary of State

Entity Name: COMPREHENSIVE MORTGAGE PROCESSING, INC.

Current Principal Place of Business:

471 MARINER BLVD
SPRING HILL, FL 34609

New Principal Place of Business:

461 MARINER BLVD
SPRING HILL, FL 34609

Current Mailing Address:

471 MARINER BLVD
SPRING HILL, FL 34609

New Mailing Address:

461 MARINER BLVD
SPRING HILL, FL 34609

FEI Number: 14-1962257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNODGRASS, NANCY
471 MARINER BLVD
SPRING HILL, FL 34609 US

Name and Address of New Registered Agent:

SNODGRASS, NANCY
461 MARINER BLVD
SPRING HILL, FL 34609 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: _____

Electronic Signature of Registered Agent

08/14/2007

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SNODGRASS, NANCY
Address: 11554 NEW HAVEN DR
City-St-Zip: SPRING HILL, FL 34609

Title: D () Delete
Name: SCHULTZ, MARK
Address: 16124 PINE RIDGE DR
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STULTZ, MARK
Address: 7313 LANDMARK DRIVE
City-St-Zip: SPRING HILL, FL 34606

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: MARK STULTZ

D

08/14/2007

Electronic Signature of Signing Officer or Director

Date