## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000114996

FILED Apr 15, 2008 Secretary of State

Entity Name: MORTGAGE MANAGEMENT CONSULTANTS, INC.

Current Principal Place of Business:		e of Business:	New Principal Place of Business:	
UITE B	PA ROAD			
ALM HAF	RBOR, FL 34	683		
urrent Mailing Address:		ess:	New Mailing Address:	
UITE B	PA ROAD RBOR, FL 34	683		
	: 20-5715875	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
	R, STANLEY PA ROAD			
	RBOR, FL 34	683 US		
he above	•		e purpose of changing its registere	d office or registered agent, or both
ALM HAF ne above	e named entity e of Florida.		e purpose of changing its registere	ed office or registered agent, or both
ALM HAF ne above the State	e named entity e of Florida. RE:			ed office or registered agent, or both  Date
ALM HAP ne above the State GNATUI	e named entity e of Florida. RE: Electro	submits this statement for th		
ALM HAP The above The State GNATUI  Control  Con	e named entity e of Florida. RE: Electro	submits this statement for the submits this statement for the submits this statement for the submits statement for the submits submits statement for the submits submi	Agent	
ALM HAP The above The State GNATUI  Continue	e named entity e of Florida.  RE: Electro  mpaign Financii  S AND DIREC	submits this statement for the spirit Signature of Registered Ang Trust Fund Contribution ( ).  CTORS:  ) Delete CANLEY ROAD	Agent	Date
ALM HAP ne above the State GNATUI ection Car FFICER: the: the: the: the: the: the: the: the	e named entity e of Florida.  RE:  Electro  mpaign Financia  S AND DIRECT  P ( BLACKER, ST 2445 TAMPA   PALM HARBO	submits this statement for the spirit signature of Registered And Trust Fund Contribution ( ).  CTORS:  ) Delete CANLEY ROAD R, FL 34683  ) Delete ETH LIFFE DRIVE	Agent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: STANLEY BLACKER P 04/15/2008