


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

03-14-2008 90034 009 \*\*\*150.00

**DOCUMENT # P07000035887**

1. Entity Name  
**MORTGAGES 24/7, INC.**



Principal Place of Business  
**1104-G BEVILLE ROAD  
 DAYTONA BEACH, FL 32114**

Mailing Address  
**1104-G BEVILLE ROAD  
 DAYTONA BEACH, FL 32114**

2. Principal Place of Business - No P.O. Box #  
**1120 Beville Rd.**

3. Mailing Address  
**1120 Beville Rd.**

Suite, Apt. #, etc.  
**Ste B**

Suite, Apt. #, etc.  
**Ste B.**

City & State  
**Daytona Beach, FL.**

City & State  
**Daytona Beach, FL.**


Zip  
**32114**

Country  
**USA**

Zip  
**32114**

Country  
**USA**

**40045518**



03112008 Chg-P CR2E034 (12/06)

4. FEI Number  
**20-8689354**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BRUNER, PAMELA F  
 1104-G BEVILLE ROAD  
 DAYTONA BEACH, FL 32114**

7. Name and Address of New Registered Agent

Name  
**Bruner, Pamela F.**

Street Address (P.O. Box Number is Not Acceptable)  
**1120 Beville Rd. Ste B**

City  
**Daytona Beach** FL Zip Code  
**32114**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Pamela F. Bruner* DATE **3/11/08**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRUNER, PAMELA F		NAME Bruner, Pamela F.	
STREET ADDRESS 1104-G BEVILLE ROAD		STREET ADDRESS 1120 Beville Rd. Ste B	
CITY-ST-ZIP DAYTONA BEACH, FL 32114		CITY-ST-ZIP Daytona Beach, Fl. 32114	
TITLE VP	<input type="checkbox"/> Delete	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRUNER, LARRY G		NAME Bruner, Larry G.	
STREET ADDRESS 1104-G BEVILLE ROAD		STREET ADDRESS 1120 Beville Rd. Ste B	
CITY-ST-ZIP DAYTONA BEACH, FL 32114		CITY-ST-ZIP Daytona Beach, Fl. 32114	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Pamela F. Bruner* DATE: **3/11/08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #