## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 28, 2005 8:00 am **Secretary of State DOCUMENT # P08472** 03-28-2005 90082 041 \*\*\*150.00 1. Entity Name TRANSOUTH MORTGAGE CORPORATION Principal Place of Business Mailing Address % ASSOCIATES CORP OF NORTH AMERICA 300 ST PAUL PLACE 50031560 250 CARPENTER FREEWAY BSP 10D IRVING, TX 75062 US BALTIMORE, MD 21202 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142005 Chq-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 57-0356496 Not Applicable Zip Country Country Zin \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP TITLE Delete ☐ Change BAYLESS, JERRY W NAME NAME HIGHWAY 12x 2208 HIGHWAY #121, SUITE 100 STREET ADDRESS STREET ADDRESS 76821 CITY-ST-ZIP BEDFORD, TX 76021 CITY-ST-ZIP TITLE Delete TITLE GOFF, HARRY D NAME NAME STREET ADDRESS 15800 JOHN J. DELANEY DRIVE STREET ADDRESS CITY-ST-ZIP CHARLOTTE, NC 28277 CITY-ST-ZIP VICE PRES TITLE 🙇 Delete TITLE ☐ Change Addition NAME NICHOLS, R. STEPHEN NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS **IRVING, TX 75062** CITY-ST-ZIP City-St-7IP TITLE **DVPS** Defete TITLE Change Addition WONG, MARTIN J NAME 300 ST PAUL PLACE STREET ADDRESS STREET ADDRESS BALTIMORE, MD 21202 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition BAIN, D.W. DAVID NAME NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS CITY-ST-ZIP **IRVING, TX 75062** CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

SIGNATURE:

JONES, JOHN I

300 ST PAUL PLACE

BALTIMORE, MD 21202

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

FILED