2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28892

Entity Name: MORTGAGE INFORMATION SERVICES, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
4877 GALAXY PARKWAY SUITE 1				4877 GALAXY PARKWAY			
CLEVELAND, OH 44128				SUITE I CLEVELAND, OH 44128			
Current Mailing Address:			New	New Mailing Address:			
4877 GALAXY PARKWAY				4877 GALAXY PARKWAY			
SUITE 1 CLEVELAND, OH 44128				SUITE I CLEVELAND, OH 44128			
FEI Number: 34-1641398 FEI Number Applied For ()		El Number No			Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				e and a	Address o	f New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Date							
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:			ADD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VP () C GILSON, JOSEPI 8910 MIRAMAR F MIRAMAR, FL 33	PKWY. STE 308	Title: Name: Addres City-S	ss:		(X) Change () Addition SEPH C 7TH AVE STE 102 S, FL 33014	
Title: Name: Address: City-St-Zip:	KAUFMAN, STEV	BLDG 25 PROSPCT AVE W	Title: Name: Addres City-S	ss:	D CRAIG, BAR 359 AMITY F BETHANY, C	RD	
Title: Name: Address: City-St-Zip:	STEIN-SAPIR, LE 4877 GALAXY PH		Title: Name: Addres City-S	ss:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CFO () E ROSSMAN, TODI 4877 GALAXY PH WARRENSVILEE	O KWY, STE I	Title: Name: Addres City-S	ss:	ROSSMAN, 4877 GALAX	(X) Change () Addition TODD A (Y PKWY, STE I IILEE HTS, OH 44128	
Title: Name: Address: City-St-Zip:	D () E BARTON, CRAIG 359 AMITH RD BETHANY, CT 06		Title: Name: Addres City-S	ss:	D VELTRI, STE 1 FIRST AMI SANTA ANA,	ERICAN WAY	

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: TODD A ROSSMAN CFO 04/14/2009