

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000003761

FILED
Jul 02, 2007
Secretary of State

Entity Name: TOWN & COUNTRY MORTGAGE SERVICES, INC.

Current Principal Place of Business:

937 N. MAGNOLIA AVE
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

937 N. MAGNOLIA AVE
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-3159160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PILCHICK, STEVEN
200 E. MARKS ST.
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

PILCHICK, STEVEN
937 N. MAGNOLIA AVE
ORLANDO, FL 32803 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: STEVEN PILCHICK

07/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PILCHICK, STEVEN
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: SVP () Delete
Name: WALWYN, LEROY
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: VP (X) Delete
Name: BILLICA, BARRY
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: T () Delete
Name: PERRIER, DONNA
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: S () Delete
Name: BOWSER, JOLYNN
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

Title: VPRO () Delete
Name: NICKELS, KERRI
Address: 937 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: STEVEN PILCHICK

DP

07/02/2007

Electronic Signature of Signing Officer or Director

Date