## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000035864

**Entity Name:** ACCESS MORTGAGE CORPORATION

FILED Jan 31, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	RACK RD NE					
G FORT WAL	TON BEACH,	FL 32547				
Current Mailing Address:				New Mailing Address:		
11 RACE TRACK RD NE						
G FORT WALTON BEACH, FL 32547						
FEI Number: 59-3182329 FEI Number Applied For ( ) FEI Number					icable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
BROWN, ROBERT C JR 11 RACETRACK RD NW , STE G FORT WALTON BEACH, FL 32547 US				BLOSSMAN, CHRIS H 11 RACETRACK RD NW , STE G FORT WALTON BEACH, FL 32547 US		
The above in the State		ubmits this statement for the p	purpose o	f changing it	s registered	d office or registered agent, or both,
SIGNATURE: CHRIS BLOSSMAN				01/31/2005		
Electronic Signature of Registered Agent						Date
Election Carr	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () I BROWN, ROBER 1001 SHALIMAR SHALIMAR, FL (	PT DRIVE		Title: Name: Address: City-St-Zip:	P BLOSSMAN 79 BAYWINI DESTIN, FL	DS DRIVE
Title: Name: Address: City-St-Zip:	S () I LEGER, CLAIR 404 EAST KIRKL COVINGTON, LA			Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () I GARY BLOSSMA 16 BLOSSMAN L COVINGTON, LA	ANE		Title: Name: Address: City-St-Zip:	D BLOSSMAN 16 BLOSSM COVINGTON	AN LANE
Title: Name: Address: City-St-Zip:	VP ( ) I CAROLE L. SIMF 5852 WARD RAI CRESTVIEW, FL	ICH RD		Title: Name: Address: City-St-Zip:	VP SMITH, KAY 2580 COVE NAVARRE, F	ROAD
Title: Name: Address:	AVP () I BRENDA N. SLU 2550 ERWIN FL			Title: Name: Address:	AVP SLUSCHEW 2550 FRWIN	(X) Change ()Addition 'SKI, BRENDA N N FLEET RD

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SHALIMAR, FL 32579

SIGNATURE: CLAIR LEGER S 01/31/2005

SHALIMAR, FL 32579

City-St-Zip: