

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000003207

FILED
May 01, 2009
Secretary of State

Entity Name: AVAIL MORTGAGE CORPORATION

Current Principal Place of Business:

4345 GUNN HWY #191
TAMPA, FL 33618

New Principal Place of Business:

5373 EHRlich RD
203-161
TAMPA, FL 33625

Current Mailing Address:

4345 GUNN HWY #191
TAMPA, FL 33618

New Mailing Address:

5373 EHRlich RD
203-161
TAMPA, FL 33625

FEI Number: 59-3220812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URBANSKI, PAUL S
10014 N. DALE MABRY HWY
SUITE 101
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

URBANSKI, PAUL S
5373 EHRlich RD
SUITE 203-161
TAMPA, FL 33625 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: PAUL S URBANSKI

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: URBANSKI, PAUL S
Address: 11710 CARROLLWOOD COVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PAUL S URBANSKI

MR

05/01/2009

Electronic Signature of Signing Officer or Director

Date