

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000056713

Entity Name: WATSON MORTGAGE CORP.

FILED
Jan 29, 2009
Secretary of State

Current Principal Place of Business:

6206 ATLANTIC BOULEVARD
SUITE 1
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

6206 ATLANTIC BOULEVARD
SUITE 1
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-3256287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATSON, WILLIAM A JR
7821 DEERCREEK CLUB RD, #200
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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:

Title: T () Delete
Name: WATSON, WILLIAM A JR.
Address: 7821 DEERCREEK RD. #200
City-St-Zip: JACKSONVILLE, FL 32256

Title: P () Delete
Name: WATSON, WILLIAM III
Address: 4237 SAILSBURY RD. #200
City-St-Zip: JACKSONVILLE, FL 32216

Title: SC () Delete
Name: YOUNG, KAREN J
Address: 4237 SALISBURY RD. #200
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: WATSON, WILLIAM III
Address: 6206 ATLANTIC BLVD, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32211

Title: SC (X) Change () Addition
Name: WATSON, JENNIFER
Address: 6206 ATLANTIC BLVD, SUITE 1
City-St-Zip: JACKSONVILLE, FL 32211

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: JILL TERRY

Electronic Signature of Signing Officer or Director

ADMI

01/29/2009

Date