


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P95000055376	
1. Entity Name P & M MORTGAGE AND INVESTMENT, INC.	

Principal Place of Business 105 MARABELLA LOOP KISSIMMEE, FL 34759 US	Mailing Address 843 CYPRESS PKWY., #302 KISSIMMEE, FL 34759
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01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3327788	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GREENWOOD, W.P. CEO 843 CYPRESS PKWY. #302 KISSIMMEE, FL 34759
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **3/1/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GREENWOOD, W.P. 15121 MANGAUX DRIVE CLERMONT, FL 34744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPGM GREENWOOD, W.N. 105 MARABELLA LOOP KISSIMMEE, FL 34759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREENWOOD, MK. 5156 EASTWINDS DR. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GREENWOOD, MARGARET M 105 MARABELLA LOOP KISSIMMEE, FL 34759
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/20/06-80031-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **VP + GM**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/06
Date

863-421-9147
Daytime Phone #

W.N. Greenwood