## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000036335

Entity Name: A.L.S. MORTGAGE COMPANY

FILED Feb 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6152 DELANCEY STATION STREET 8905 RIVERLACHEN WAY SUITE 205 RIVERVIEW, FL 33578 U

RIVERVIEW, FL 33569 US

Current Mailing Address: New Mailing Address:

6152 DELANCEY STATION STREET 8905 RIVERLACHEN WAY SUITE 205 RIVERVIEW, FL 33578 US

RIVERVIEW, FL 33569 US

FEI Number: 59-3381327 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LASMAN, JEFFREY M
6152 DELANCEY STATION STREET
8905 RIVERLACHEN WAY
SUITE 205 RIVERVIEW, FL 33578 US

SUITE 205 RIVERVIEW, FL 33578 US RIVERVIEW, FL 33578 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: LAURIE M TURNER 02/25/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: TURNER, LAURIE M Name: TURNER, LAURIE M P
Address: 2005 BIVERI ACHENIMAY

Address: 8819 RIVERLACHEN WAY Address: 8905 RIVERLACHEN WAY City-St-Zip: RIVERVIEW, FL 33569 US City-St-Zip: RIVERVIEW, FL 33578 US

Title: VPS (X) Delete Title: ( ) Change ( ) Addition

 Name:
 LASMAN, JEFFREY M
 Name:

 Address:
 6152 DELANCEY STATION STREET
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569 US
 City-St-Zip:

Title: VP T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ATKINS, WILLIAM R
 Name:

 Address:
 6152 DELANCEY STATION STREET
 Address:

 City-St-Zip:
 RIVERVIEW, FL 33569 US
 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: LAURIE M TURNER P 02/25/2008