## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 06, 2008 08:00 AN Secretary of State

1. Entity Name APEX MORTGAGE, INC.	71				Sec	eretai	y of \	State
Principal Place of Business	Mailing Address			1				
6855 W HIGHWAY 40	9855 W HIGHWAY 40	-						
UNIT B COALA, FL 34482	UNIT B OCALA, FL 34482							
1								
2. Principal Place of Business - No P.O. Box # 3	B. Mailing Address							<b># 6 6 1</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Suite, Apt. #, etc.	Suite, Apt. #, etc.			05052008	Chg-P	CR2E0	34 (12/08)	
City & State	City & State	÷		4. FEI Number 65-08408	395 <sup>*</sup>			oplied For of Applicable
Zip Country	Zip	Çoun	ity	5. Certificate of	Status Desired		\$8.75 Add	
6. Name and Address of Current Reg	sistered Agent	<u></u>	1	7. Name and A	ddress of New R			<b>N</b>
			Name					
PERKINS, MARY 8855 W HIGHWAY 40 UNIT B			Street Address (	P.O. Box Number	s Not Acceptable	·)		•
OCALA, FL 34482					,		**	
			City			FL	Zip Coo	8 .
The above named entity aubmits this statement for the					1 - 1 - 5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
the obligations of registered agent.				on agoing or oosig	W. I. O Olale Of The		animas maj,	and accept
SIGNATURE Signature, typed or printed hame of registered agent and the	A f spolinging (NO		<del></del>					
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12. Hereby certify that the information aupplied with this fling 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:

MULLY LUCIONS
SIGNATURE AND TIPED OF PRINTED MAKE OF BIGLING OFFICER OR DIRECTOR

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