

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000070022

FILED
Mar 24, 2006
Secretary of State

Entity Name: PROFESSIONAL MORTGAGE SOLUTIONS, INC.

Current Principal Place of Business:

2550 PLACIDA RD.
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

2550 PLACIDA RD.
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 65-0857103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSSMAN, BRENDA STARR
2550 PLACIDA RD.
ENGLEWOOD, FL 34224 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: D () Delete
Name: BOSSMAN, BRENDA STARR
Address: 2424 PLACIDA ROAD, UNIT 303D
City-St-Zip: ENGLEWOOD, FL 34224

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BOSSMAN, BRENDA STARR
Address: 2550 PLACIDA ROAD, UNIT 303D
City-St-Zip: ENGLEWOOD, FL 34224

Title: SEC () Change (X) Addition
Name: BOSSMAN, BRADLEY A
Address: 2550 PLACIDA ROAD
City-St-Zip: ENGLEWOOD, FL 34224

I hereby certify that the information supplied with this filing does not qualify for the 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: BRENDA STARR BOSSMAN

PRES

03/24/2006

Electronic Signature of Signing Officer or Director

Date