

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000023450

1. Entity Name
 UNITED MORTGAGE AFFILIATES, INC.



Principal Place of Business
 6482 US 41 NORTH
 APOLLO BEACH, FL 33572 US

Mailing Address
 6482 US 41 NORTH
 APOLLO BEACH, FL 33572 US



05092006 No Chg-P CR2E034 (11/05)

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4. FEI Number
 59-3559357 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VANDERMAST, LEONARD III
 6213 MARBELLA BLVD
 APOLLO BEACH, FL 33572

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VANDERMAST, LEONARD III 6213 MARBELLA BLVD APOLLO BEACH, FL 33572
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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: Leonard Vandermaast III 5/9/2006 813-641-7158
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #