

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000033235

FILED  
Apr 19, 2007  
Secretary of State

Entity Name: ALLIED FIRST SOURCE MORTGAGE, INC.

## Current Principal Place of Business:

253 DRIFTWOOD POINT ROAD  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

253 DRIFTWOOD POINT ROAD  
SANTA ROSA BEACH, FL 32459 US

## Current Mailing Address:

253 DRIFTWOOD POINT RD  
SANTA ROSA BEACH, FL 32459

## New Mailing Address:

253 DRIFTWOOD POINT RD  
SANTA ROSA BEACH, FL 32459 US

FEI Number: 59-3568102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSBORNE, ILEANA E  
253 DRIFTWOOD POINT RD  
SANTA ROSA BCH, FL 32459 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: PVTs ( ) Delete  
Name: OSBORNE, ILEANA E  
Address: 253 DRIFTWOOD POINT RD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTs (X) Change ( ) Addition  
Name: OSBORNE, ILEANA E  
Address: 253 DRIFTWOOD POINT RD  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: ILEANA E. OSBORNE

PVTs

04/19/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date