

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040453

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: INNOVATIVE MORTGAGE SPECIALIST, INC.

## Current Principal Place of Business:

3805 UNIVERSITY BLVD. W  
SUITE A  
JACKSONVILLE, FL 32217

## New Principal Place of Business:

6241 AUTMN BERRY CIRCLE  
JACKSONVILLE, FL 32258

## Current Mailing Address:

11901 BURNT MILL RD  
1104  
JACKSONVILLE, FL 32256

## New Mailing Address:

6241 AUTUMN BERRY CIRCLE  
JACKSONVILLE, FL 32258

FEI Number: 59-3588133

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GROGAN, JOHN  
10901 BURNT MILL RD  
1104  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

GROGAN, JOHN  
6241 AUTUMN BERRY CIRCLE  
JACKSONVILLE, FL 32258 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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GROGAN, JONATHAN P  
Address: 616 ACORN CT  
City-St-Zip: JACKSONVILLE, FL 32259

Title: CHTD ( ) Delete  
Name: GROGAN, JOHN P  
Address: 10901 BURNT MILL RD  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VSD ( ) Delete  
Name: GROGAN, THERESA S  
Address: 616 ACORN CT  
City-St-Zip: JACKSONVILLE, FL 32259

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CHTD (X) Change ( ) Addition  
Name: GROGAN, JOHN P  
Address: 6241 AUTUMN BERRY CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN P GROGAN

CHTD

04/28/2006

Electronic Signature of Signing Officer or Director

Date