2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004
Secretary of State

DOCUMENT# S51067

Entity Name: QUALIFIED MORTGAGE SERVICES, INC.

Current Principal Place of Business:

89 GENEVA DRIVE
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 621990
OVIEDO, FL 327621990 US

New Mailing Address:

FEI Number: 59-3133741 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOGG, BONNIE
1927 LAKE DR.
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

PAYNE, JULIE
1008 SHINNECOCK HILL DR
OVIEDO, FL 32765 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: JULIE PAYNE 07/08/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GOLESTANI, ANNE,
Address: 28760 NO 83RD ST.
City-St-Zip: SCOTTSDALE, AZ 85262

Title: V ( ) Delete
Name: GOLESTANI, FRED,
Address: 28760 NO 83RD ST.
City-St-Zip: SCOTTSDALE, AZ 85262

Title: S ( ) Delete
Name: FOGG, BONNIE
Address: 1927 LAKE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOLESTANI, ANNE,
Address: 28760 NO 83RD ST.
City-St-Zip: SCOTTSDALE, AZ 85262 US

Title: V (X) Change ( ) Addition
Name: GOLESTANI, FRED,
Address: 28760 NO 83RD ST.
City-St-Zip: SCOTTSDALE, AZ 85262 US

Title: S (X) Change ( ) Addition
Name: GOLESTANI, FRED,
Address: 28760 NO 83RD ST.
City-St-Zip: SCOTTSDALE, AZ 85262 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANNE GOLESTANI P 07/08/2004
Electronic Signature of Signing Officer or Director Date