## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# S55203

FILED Feb 15, 2008 Secretary of State

Entity Name: TAYLOR, BEAN & WHITAKER MORTGAGE CORP.

**Current Principal Place of Business: New Principal Place of Business:** 101 NE 2ND STREET 315 NE 14TH ST. OCALA, FL 34470 OCALA, FL 34470 US **Current Mailing Address: New Mailing Address:** 101 NE 2ND STREET 315 NE 14TH ST OCALA, FL 34470 US OCALA, FL 34470 US FEI Number: 59-3069391 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition BOWMAN, RAYMOND E BOWMAN, RAYMOND E Name: Name: 101 NE 2ND STREET 315 NE 14TH ST Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: OCALA, FL 34470 Title: VC Title: () Change () Addition () Delete DICKINSON, SHERRY D Name: Name: 1760 THE EXCHANGE SE Address: Address: ATLANTA, GA 30339 US City-St-Zip: City-St-Zip: Title: Title: C/S ( ) Delete C/S (X) Change ( ) Addition FARKAS, LEE B FARKAS, LEE B Name: Name: 101 NE 2ND STREET 315 NF 14TH ST Address: Address: City-St-Zip: OCALA, FL 34470 US City-St-Zip: OCALA, FL 34470 US Title: CEO () Delete Title: CEO (X) Change ( ) Addition ALLEN, R. PAUL ALLEN, R. PAUL Name: Name: Address: 101 NE 2ND STREET Address: 315 NE 14TH ST. City-St-Zip: OCALA, FL 34470 US City-St-Zip: OCALA, FL 34470 US Title: Title: ( ) Change (X) Addition () Delete SCOTT, STUART L Name: Name: Address: Address: 315 NE 14TH ST. City-St-Zip: City-St-Zip: OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify 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: RAYMOND E. BOWMAN PRES 02/15/2008