

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S81363

FILED
Jul 07, 2008
Secretary of State

Entity Name: THE MORTGAGE CAPITAL OF AMERICA, INC.

Current Principal Place of Business:

4200 NW 16TH ST
SUITE 303
LAUDERHILL, FL 33313 US

Current Mailing Address:

4200 NW 16TH ST
SUITE 303
LAUDERHILL, FL 33313 US

New Principal Place of Business:

9600 W SAMPLE ROAD
SUITE 401
CORAL SPRINGS, FL 33065 US

New Mailing Address:

9600 W SAMPLE ROAD
SUITE 401
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0284182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHARPE, NEVILLE
4200 NW 16TH ST
SUITE 303
LAUDERHILL, FL 33313 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

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHARPE, NEVILLE A.,
Address: 10609 LAGO WELLEBY DR
City-St-Zip: SUNRISE, FL

Title: VP () Delete
Name: GARTH, MARIE
Address: 10609 LARGO WELLERY DRIVE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHARPE, NEVILLE A.,
Address: 7362 GREENPORT COVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP (X) Change () Addition
Name: GARTH, MARIE
Address: 7362 GREENPORT COVE
City-St-Zip: BOYNTON BEACH, FL 33437

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: NEVILLE SHARPE

D

07/07/2008

Electronic Signature of Signing Officer or Director

Date