

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Suzanne B. Morrison
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 4:19

DOCUMENT # **F94000003499 (0)**

1. Corporation Name

GLOBAL WIDE MORTGAGE COMPANY

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**1857 E. 71ST STREET
CHICAGO IL 60649**

3. Date Incorporated or Qualified **07/05/1994** 3a. Date of Last Report **N/A**

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

4. FEI Number **36-3848541** Applied For
Not Applicable

22 City & State 27 City & State

5. Certificate of Status Desired **\$8.75** Additional Fee Required

23 Zip 28 Country

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

24 Zip 25 Country 29 Zip 30 Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOORE, JAY B
3802 EHRlich RD., STE 201
TAMPA FL 33624**

81 Name **MOORE JAY B.**
82 Street Address (P.O. Box Number is Not Acceptable) **4821 E. BUSCH BLVD**
83 **Suite 'B'**
84 City **TAMPA** 85 Zip Code **FL 33617**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* 1-13-95 DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PCD**
NAME **REDMOND, AUGUSTUS**
STREET ADDRESS **6924 S. ESSEX**
CITY-ST-ZIP **CHICAGO IL**

1.1 TITLE **PCD** Change Addition
1.2 NAME **REDMOND, AUGUSTUS**
1.3 STREET ADDRESS **7924 S. ESSEX**
1.4 CITY-ST-ZIP **Chicago IL 60617**

TITLE **VD**
NAME **HARDIN, W D**
STREET ADDRESS **7829 S. KINGSTON**
CITY-ST-ZIP **CHICAGO IL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for this exemption stated in Section 199.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE: *[Signature]* 1-13-95 3/2/93 3800 DATE (Print Name)