


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000001591 (4)**

1. Corporation Name
CH MORTGAGE COMPANY

Principal Place of Business
**7001 N. SCOTTSDALE RD., STE 2055
SCOTTSDALE AZ 85253**

Mailing Address
**7001 N. SCOTTSDALE RD., STE 2055
SCOTTSDALE AZ 85253**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/28/1996	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 87-1417815		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MORONEY, JOHN P
8000 GOVERNOR'S SQUARE BLVD
SUITE 101
MIAMI LAKES FL 33016**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85** Zip Code

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ DELETE
1.2 NAME **PD PRESENT, RANDALL C**
1.3 STREET ADDRESS **11911 BURNET ROAD**
1.4 CITY-ST-ZIP **AUSTIN TX**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ DELETE
2.2 NAME **VS GADBERRY, COLEEN**
2.3 STREET ADDRESS **7001 N SCOTTSDALE RD., STE 2050**
2.4 CITY-ST-ZIP **SCOTTSDALE AZ**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **VS COLEEN JOHNSTON**
2.3 STREET ADDRESS **7001 N. SCOTTSDALE RD. STE 2050**
2.4 CITY-ST-ZIP **SCOTTSDALE AZ**

3.1 TITLE ☐ DELETE
3.2 NAME **D RYAN, ROBERT B**
3.3 STREET ADDRESS **7001 N SCOTTSDALE RD STE 2050**
3.4 CITY-ST-ZIP **SCOTTSDALE AZ**

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

4.1 TITLE ☐ DELETE
4.2 NAME **D HICKOX, W T**
4.3 STREET ADDRESS **7001 N SCOTTSDALE RD., STE 2050**
4.4 CITY-ST-ZIP **SCOTTSDALE AZ**

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

5.1 TITLE ☒ DELETE
5.2 NAME **T CHRISTINA M MONKEWICZ**
5.3 STREET ADDRESS **7001 N SCOTTSDALE RD STE 2050**
5.4 CITY-ST-ZIP **SCOTTSDALE AZ**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **TAS DAFFIN, PATRICIA A.**
5.3 STREET ADDRESS **4515 SETON CENTER PKWY, STE 200**
5.4 CITY-ST-ZIP **AUSTIN, TX 78759**

6.1 TITLE ☐ DELETE
6.2 NAME **AS WOLNOSKI, BEA**
6.3 STREET ADDRESS **7001 N SCOTTSDALE RD., STE 2055**
6.4 CITY-ST-ZIP **SCOTTSDALE AZ**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **VAS LUECHAUER, SONYA**
6.3 STREET ADDRESS **4515 SETON CENTER PKWY, STE 200**
6.4 CITY-ST-ZIP **AUSTIN, TX 78759**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 attachment with an address.

SIGNATURE: 

3/28/98

CR2E034 (10/97)