


Apr 25 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # F96000006736 (0)</b> 1. Corporation Name <b>ADAM MORTGAGE COMPANY</b>		
Principal Place of Business <b>2800 S. TEXAS AVE., #200</b> <b>BRYAN TX 77802</b>		Mailing Address <b>2800 S. TEXAS AVE., #200</b> <b>BRYAN TX 77802-5343</b>
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 26 Zip 28 Country	
g. Name and Address of Current Registered Agent <div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> <b>F&amp;L CORP.</b>  <b>200 LAURA ST.</b>  <b>JACKSONVILLE FL 32202</b> </div> <div style="width: 15%;">         81 Name          82 Street Address          83          84 City       </div> </div>		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, and I, the undersigned, as a duly authorized officer or agent, accept the obligations of, Section 607.0505, Florida Statutes.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required for all corporations.)</small>		
<b>12. OFFICERS AND DIRECTORS</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>RIGGS, WILLIAM P</b> <b>113430 NW FREEWAY, #202</b> <b>HOUSTON TX 77040</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS</b> <b>ALMAGUER, GERIE</b> <b>4001 E. 29TH ST., #120</b> <b>BRYAN TX 77802</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>SPENCER, TIMOTHY P</b> <b>2800 S. TEXAS AVE., #200</b> <b>BRYAN TX 77802</b>	<input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DC</b> <b>O'MALLEY, JOHN T</b> <b>4001 E. 29TH ST., #120</b> <b>BRYAN TX 77802</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>KUTTLER, KEITH H</b> <b>2800 S. TEXAS AVE., #200</b> <b>BRYAN TX 77802</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HEFNER, MAX R</b> <b>2800 S. TEXAS AVE., #200</b> <b>BRYAN TX 77802</b>	<input type="checkbox"/> DELETE
<b>13.</b>		
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP



The information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statute. This annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as the signature of the officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statute, if changed, or on an attachment with an address.

*S. J. [Signature]* Vice President 4/8/97

CR2E034 (9/96)