

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 4:52

DOCUMENT # **H78460** (3)

1. Corporation Name

ST. JOHNS MORTGAGE & INVESTMENT CORP.

Principal Place of Business

**3020 HARTLEY ROAD, STE 330
JACKSONVILLE FL 32257-3266**

Mailing Address

**3020 HARTLEY ROAD, STE 330
JACKSONVILLE FL 32257-3266**

DO NOT WRITE IN THIS SPACE.

2. Date Incorporated or Qualified

09/30/1985

3a. Date of Last Report

02/28/1994

4. FEI Number

59-2586246

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MANNING, WYNDHAM M.
3020 HARTLEY ROAD 330
JACKSONVILLE FL 32257**

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD
NAME	WOOLFE, JOHN M.
STREET ADDRESS	3020 HARTLEY RD 330
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	EVS
NAME	MANNING, WYNDHAM M.
STREET ADDRESS	3020 HARTLEY ROAD 330
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	V
NAME	RAY, MARTHA J.
STREET ADDRESS	155 BLANDING BLVD., SE. 10-11
CITY - ST - ZIP	ORANGE PARK FL
TITLE	V
NAME	MCCULLOCH, PATRICIA
STREET ADDRESS	3020 HARTLEY RD., STE. 330
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	V
NAME	SMITH, J GREGORY
STREET ADDRESS	3020 HARTLEY ROAD 330
CITY - ST - ZIP	JACKSONVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	C
1.2 NAME	Mattice, William T.
1.3 STREET ADDRESS	2032-D Thomasville Rd.
1.4 CITY - ST - ZIP	Tallahassee, FL 32312
2.1 TITLE	V
2.2 NAME	Driver, Buford A. Driver
2.3 STREET ADDRESS	1270 N. Eglin Pkway A-11
2.4 CITY - ST - ZIP	Shalimar, FL 32579
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	V
4.2 NAME	Barbara M. Tetreault
4.3 STREET ADDRESS	3020 Hartley Rd., Ste. 330
4.4 CITY - ST - ZIP	Jacksonville, FL
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	V
6.2 NAME	Diane Wagner
6.3 STREET ADDRESS	3020 Hartley Rd., Ste. 330
6.4 CITY - ST - ZIP	Jacksonville, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, unchanged, on an attachment with an address.

SIGNATURE:

John M. Woolfe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John M. Woolfe

3/27/95

(904) 260-4400

Date

Telephone Number