

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sherida E. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P40945** (8)

1. Corporation Name

MORTGAGE SERVICING ACQUISITION CORPORATION

Principal Place of Business

7600 EAST ORCHARD ROAD
SUITE 330S
ENGLEWOOD CO 80111
US

Mailing Address

7600 EAST ORCHARD ROAD
SUITE 330S
ENGLEWOOD CO 80111
US



2. Principal Place of Business

2a. Mailing Address

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9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.15(1)(b), 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 jurisdiction of the State of Florida, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

101 NAME	PD	☐ DELETE
102 NAME	CHOTIN, STEVEN B.	
103 STREET ADDRESS	PLAZA TOWER ONE, STE 1200, 6400 S. FIDDL GRN	
104 CITY & STATE	ENGLEWOOD CO	
105 ZIP	VPD	☐ DELETE
106 NAME	BUTTERWICK, ROGER B.	
107 STREET ADDRESS	PLAZA TWR ONE, STE 1200, 6400 S. FIDDLR GREN	
108 CITY & STATE	DENVER CO	
109 ZIP	VPT	☐ DELETE
110 NAME	GRUBEN, EDWARD C.	
111 STREET ADDRESS	PLAZA TWR ONE, STE 1200, 6400 S FIDDLR GREN	
112 CITY & STATE	DENVER CO	
113 ZIP	EVP	☐ DELETE
114 NAME	STULZ, CRAIG A.	
115 STREET ADDRESS	7600 E. ORCHARD ROAD, SUITE 330S	
116 CITY & STATE	ENGLEWOOD CO	
117 ZIP	VPS	☐ DELETE
118 NAME	MARON, CHRISTINE	
119 STREET ADDRESS	7600 E. ORCHARD ROAD, SUITE 330S	
120 CITY & STATE	ENGLEWOOD CO	
121 ZIP		☐ DELETE
122 NAME		
123 STREET ADDRESS		
124 CITY & STATE		
125 ZIP		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1301 NAME	☐ Change ☐ Addition
1302 NAME	
1303 STREET ADDRESS	
1304 CITY & STATE	
1305 ZIP	
1306 NAME	
1307 STREET ADDRESS	
1308 CITY & STATE	
1309 ZIP	
1310 NAME	
1311 STREET ADDRESS	
1312 CITY & STATE	
1313 ZIP	
1314 NAME	
1315 STREET ADDRESS	
1316 CITY & STATE	
1317 ZIP	
1318 NAME	
1319 STREET ADDRESS	
1320 CITY & STATE	
1321 ZIP	

14. I, the undersigned, certify that the information supplied to the Florida Department of State is true and correct and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation and have the power or authority to execute this report as required by Chapter 637, Florida Statutes; and that my name appears in Block 12 or Block 13 of this certificate for good and lawful reasons.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Christine Maron
Christine Maron

1/17/96

(303)741-8102

CR2E034 (12/95)