

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

CORPORATION
ANNUAL REPORT
1995



OFFICE OF REVENUE OF THE STATE
JENNIFER M. MONTGOMERY
Secretary of State
100 SOUTH WASHINGTON STREET, TALLAHASSEE, FLORIDA 32304

**APPROVED
AND
FILED**

95 MAY -1 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P41055** (5)

1. Corporation Name
THE MORTGAGE AUTHORITY, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **33200 W. 14 MILE RD
WEST BLOOMFIELD MI 48322-549
US**
Mailing Address: **ATTN: MELINDA CAIN
27555 FARMINGTON RD
FARMINGTON HILLS MI 48833-3357
US**

3. Date of Incorporation/Qualification: **10/19/1992**
3a. Date of Last Report: **05/01/1994**
4. FIC Number: **38-3069483**
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**
7. The corporation has liability for alternative tax under Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23
2a. Mailing Address: 26, 27, 28
24, 25, 29, 30

9. Name and Address of Current Registered Agent: **C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**
10. Name and Address of New Registered Agent: B1 Name, B2 Street Address (P.O. Box Number is Not Acceptable), B3, B4 City, B5 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office or registered agent, on both, in the State of Florida, and hereby waives, with respect to Florida Statutes, the corporation's right of priority, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	NAME: CONRAD, JAMES A. 27555 FARMINGTON ROAD FARMINGTON HILLS MI	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: VS	NAME: DENSMORE, ROBERT R. 27555 FARMINGTON ROAD FARMINGTON HILLS MI	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: V	NAME: BRADY, LAWRENCE J. 27555 FARMINGTON ROAD FARMINGTON HILLS MI	TITLE: Senior Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: AVP	NAME: CAIN, MELINDA 27555 FARMINGTON ROAD FARMINGTON HILLS MI	TITLE: John L. Jansen 27555 Farmington Road Farmington Hills, MI 48334-3357	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: P	NAME: MANASCO, WILLIAM C. 27555 FARMINGTON ROAD FARMINGTON HILLS MI	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE:	NAME:	TITLE: Controller/Senior Vice Pres.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE:	NAME:	TITLE: Mark Janssen	
TITLE:	NAME:	TITLE: 27555 Farmington Road	
TITLE:	NAME:	TITLE: Farmington Hills, MI 48334-3357	

14. I, the undersigned, certify that the information supplied with this filing is accurate, complete and true and is required for the corporation stated in Sections 607.01(3)(b), Florida Statutes. I further certify that the information included on this annual report is a true and correct report of the corporation and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the officer or director of the corporation to which this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or appears attached with an address.

SIGNATURE: *Melinda F. Cain*
Melinda F. Cain - Associate Vice President

4.27.95