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

CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

P96000056866

DOCUMENT #

AMERICAN MORTGAGE CAPITAL, INC.

Principal Place of Business

6190 N. W. 11th St.

6190 N. W. 11th St.

FILED May 20 1997 8:00am Secretary of State

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499.1872

Ft. Lauderdale, Fl. 33313 Ft. Lauderdale, Fl. 33313										1.3 [
										Γ	3. Date Incorporated or Qualified 3a. Date of Last Report				
											7/1/96	N/	A		
⊢ ⊸ '	2. Principal Place of Business			2a. Mailing Address							4. FEI Number		Ap	plied For	
21 6190 N. W. 11th St.				26 6190 N. W. 11th St.							65-0686815		No	t Applicable	
Suite, Apt. #, etc.				Suite. Apt. #, etc.							5. Certificate of Status Desired	X		Additional	
22				27								<u> </u>	Fee Re	equired	
City & State				City & State							6. Election Campaign Financing		\$5.00	May Be	
23 Ft. L	<u>auderda</u>			28	Ft. Lau	iderda					Trust Fund Contribution		Added t	o Fees	
Zip		Country		ļ,	Zφ	_		country			8. This corporation has liability for in			199.032,	
24 33313		25 Brow	· · · · · · · · · · · · · · · · · · ·	29	33313		30 I	Brow	ard	L		Yes 🔲 N			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name															
	To-ol N	i. Redic						81	Name	Pat	ıl A. Byer				
											dress (P.O. Box Number is Not Acceptable)				
		rthgate								6190 N. W. 11th St.					
J	Napies,	F1. 34	105		83										
	•							84	City			10	5 Zip (Code .	
								"		t. I	Lauderdale,	FL °	333		
11. Pursuant	to the provis	ions of Section	ns 607.0502	and 6	07.1508, Flori	da Statute	s. the	abov	e-named co	orpora	tion submits this statement for the pu	rpose of cha	anging its	s registered	
office or n	egistereri ag muamikar w	igtil, or both il no. Ind accep	n the State of The obligati	i Florid ons of	da Such char f. Section 607	ige was au .0505. Flor	дhогі ida S	zed by latute:	y the corpor s.	ration'	's board of directors. I hereby accep	the appoint	ment as	registered	
SIGNATURE	Mush											4/9/9			
SIGNATURE	algnature typed	or printed dame	registered agent	and titie	A. Byen	(NO1E	De gest	ered Age	ant signature req	quired w	t on reinstating)	DATE		···-	
12.			ICERS AND				1:				ADDITIONS/CHANGES TO OFFIC	RS AND DI	RECTOR	S IN 12	
TITLE	Presi	dent			X DI	ELLIE	1.	TITLE		Pr	resident		Change	Addition	
NAME	Jo-e1	Redic					1.3	2 NAME		W.	. Roy Schiller				
STREET ADDRESS											315 Ivy Lane				
CITY-ST-ZIP		s, F1.					1.4	4 CITY - S	ST - 2 1P		. Lauderdale, Fl. 3	3326			
TITLE					[]	LETE	2	1 11111			ecutive Vice Presid		Change	Addition	
NAME							23	NAME			mes P. Redic			****	
STREET ADDRESS							23	STREET	ADDRESS						
CITY-ST-ZIP							2	4 C:TY - S	ST-ZIP		35 Northgate Drive				
TITLE					DI	LLETE		TITLE	•		ples, F1. 34105		Change	Addition	
NAME							3.2	2 NAME			ce President				
STREET ADDRESS							3.2	STREET	ADDRESS		bney Mergendahl				
CITY-ST-ZIP								1 CHY-5			.16 N. W. 15th Manor				
TITLE						LETE		1,5111.5 1,740.			antation, F1. 33322		Change	X Addition	
NAME								2 NAME			ce President				
STREET ADDRESS									ADDRESS	Ji	ri Steele				
CITY-ST-ZIP							•	i City - S		49	001 S. W. 199th Ave.				
TITLE					D DE	LETE.		HILL HILL	·····	Ft	. Lauderdale, Fl. 3	3332⊤⊤	Change	X Addition	
NAME					<u></u>		1	NAME	ļ	Se	cretary/Treasurer		arium gu	T. Wallow	
									ADDRESS	Pa	ul A. Byer			KnK	
STREET ADDRESS	<i>e</i> ,										15 Palm Aire Dr. No			12/20	
CITY-ST-ZIP					DI DE	<u></u>		FONY-S Faile	1 · Alb.		mpano Beach, Fl. 33		Change	Addition	
THILE					الا لينة		1			-	50000219		Qualigo	LT MODITION	
NAME								NAME	A		-06/03/970106	ŽN17			
STREET ADDRESS									ADDRESS		***165.00	_ ~~!			
CITY - ST - ZIP		 					67	10HY-S	(1 - ZIP						

14. I do 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 697, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

954-584-8885

49.282

RESOLUTION OF THE BOARD OF DIRECTORS

American Mortgage Capital, Inc.								
Corporate Name								
Jo-el M. Redic	Incorporator/President /Secretary/Director							
Officer's Name	Title							
Paul Byer	Director & Secretary/Treasurer							
W. Roy Schiller	Director & President							
James P. Redic	Director & Vice President							
Agent for Americ	ereby resigns as an Officer, Director, and Registered can Mortgage Capital, Inc., a corporation organized the State of Florida.							
	Jo-el M. Redic Officer's Name Paul Byer W. Roy Schiller James P. Redic Jo-el M. Redic he Agent for Americ							

Jo-el M. Redic Incorporator/President/Secretary/Director

I HEREBY CERTIFY that the foregoing is a true and correct copy of a resolution presented to and adopted by the Board of Directors of American Mortgage Capital at a meeting duly called and held at Naples Florida on the 13th day of November, 1996 at which a quorum was present and voted, and that such resolution is duly recorded in the minute book of this corporation; that the officers named in said resolution have been duly elected or appointed to, and are the present incumbents of, the respective offices set after their respective name.

Certification