

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

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
 Nov 06 1998 8:00 am
 Secretary of State

DOCUMENT # P96000090402 (4)
 1. Corporation Name
FIRST CAPITAL HOME MORTGAGE, INC.



Principal Place of Business 1024 EAST SILVER SPRINGS BLVD. OCALA FL 34470	Mailing Address 1024 EAST SILVER SPRINGS BLVD. OCALA FL 34470
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 11/04/1996	4. FEI Number 59-2158963	Applied For <input type="checkbox"/> Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
23. Zip	28. Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
24. Country	29. Country	30. Country		

9. Name and Address of Current Registered Agent

GRUBBS, RUSSELL E
 1024 EAST SILVER SPRINGS BLVD.
 Ocala FL 34470

10. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	GRUBBS, RUSSELL E	
STREET ADDRESS	1024 EAST SILVER SPRINGS BLVD.	
CITY-ST-ZIP	OCALA FL 34470	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

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******150.00 ****150.00**

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ **11-04-98**

CR2E034 (10/97)

19-2



July 2, 1998

Division of Corporations
 Annual Reports Filings
 PO Box 1500
 Tallahassee, FL 32302-1500

*9-10-98
 PO Box 6327
 32314
 Reinst Section*

Re: Corporation Annual Report for 1998

Dear Sir/Madam:

We are in receipt of your SECOND NOTICE for the 1998 Profit Corporation Annual Report Packet.

Please find enclosed a copy of the report which was filed in February, 1998, together with a copy of the cancelled check for the \$150 filing fee.

Very truly yours,

FIRST CAPITAL HOME MORTGAGE

Kathryn Gileza
 KATHRYN GILEZA
 Manager
 encs.

*850-487-6059
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