

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

FILED

Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J32125 (3)

1. Corporation Name
HALLMARK MORTGAGE SERVICES, INC.

Principal Place of Business

3802 EHRLICH RD. #307
TAMPA FL 33608-
US

Mailing Address

3802 EHRLICH ROAD. #307
P.O. BOX 272065
TAMPA FL 33608-2065
US

14310 N. Dale Mabry
Suite 280, Tampa, FL 33618



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
09/02/1986

3a. Date of Last Report
02/05/1996

4. FEI Number

59-2714660

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HALL, KAY S.
3802 EHRLICH RD. #307 5260 Tuna Lane
TAMPA FL 33604 Springhill Fl 34607

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME HALL, KAY S.
STREET ADDRESS 3802 EHRLICH RD #307 5260 Tuna Lane
CITY-ST-ZIP TAMPA FL Springhill, FL 34607

TITLE SD ☐ DELETE

NAME HALL, JERRY W.
STREET ADDRESS 3802 EHRLICH RD #307 5260 Tuna Lane
CITY-ST-ZIP TAMPA FL Springhill, FL 34607

TITLE VP ☐ DELETE

NAME ATKINS, BONNY L
STREET ADDRESS 3802 EHRLICH ROAD, STE. 307 4005 HUXFORD CT.
CITY-ST-ZIP TAMPA FL 33604 TAMPA FL 33624

TITLE VP ☐ DELETE

NAME RIPLEY, J. ROBERT
STREET ADDRESS 415 SOUTH FLORIDA BLANCA
CITY-ST-ZIP PENSACOLA FL 32501

TITLE VP ☐ DELETE

NAME WOODARD, SHERRI
STREET ADDRESS 5098 98TH WAY NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33708

TITLE VP ☐ DELETE

NAME HOLLOWAY, ANDRA
STREET ADDRESS 2225 KNIGHTS ROAD
CITY-ST-ZIP WINTER HAVEN FL 33880

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: *

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/97 352-597.3268
Date Daytime Phone #

0371478

CR2E034 (9/96)