FILE NOW: FILING FEE AFTER MAY 1 IS $2[illegible]5.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **173555** **(4)**

1. Corporation Name

MCCAUGHAN MORTGAGE COMPANY, INC.

Principal Place of Business:
1320 S DIXIE HWY STE 950
P O BOX 141429
CORAL GABLES FL 33114-8429

Mailing Address:
1320 S DIXIE HWY STE 950
P O BOX 141429
CORAL GABLES FL 33114-8429

3. Date Incorporated or Qualified: **05/11/1953**

3a. Date of Last Report: **01/27/1995**

2. Foreign Place of Business
21 [illegible]
Street Address
22
City & State
23
Zip 24 | County 25

2a. Mailing Address
26
Street Address
27
City & State
28
Zip 29 | Country 30

4. FEI Number: **59-0701313** ☐ 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

MCCAUGHAN, JAMES W
1320 S DIXIE HWY #950
CORAL GABLES FL 33146

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 Section 607.0502 of the 1995 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 [illegible] DATE

12 OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	V	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	VAN HOFF, ROGER EX		1.2 NAME	
Street Address	6280 SW 68TH CT		1.3 STREET ADDRESS	
City-St-Zip	MIAMI FL		1.4 CITY-ST-ZIP	
Title	PD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MCCAUGHAN, JAMES W		2.2 NAME	
Street Address	881 OCEAN DR 18-A		2.3 STREET ADDRESS	
City-St-Zip	KEY BISCAYNE FL		2.4 CITY-ST-ZIP	
Title	SV	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MCCAUGHAN, JR. J		3.2 NAME	
Street Address	6120 DEER RUN, S.W.		3.3 STREET ADDRESS	
City-St-Zip	FT. MYERS FL		3.4 CITY-ST-ZIP	
Title	VT	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MCCAUGHAN, EILEEN P		4.2 NAME	
Street Address	881 OCEAN DR 18-A		4.3 STREET ADDRESS	
City-St-Zip	KEY BISCAYNE FL		4.4 CITY-ST-ZIP	
Title		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
Street Address			5.3 STREET ADDRESS	
City-St-Zip			5.4 CITY-ST-ZIP	
Title		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
Street Address			6.3 STREET ADDRESS	
City-St-Zip			6.4 CITY-ST-ZIP	

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is accurate, furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 with any changes noted.

SIGNATURE: [signature] EVP 11/15/96 305-665-9100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Roger Van Hoff