

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 489278 (2)

1. Corporation Name

ELLIOTT MORTGAGE COMPANY, INC.

Principal Place of Business

201 ALHAMBRA CIR.
STE 711
CORAL GABLES FL 33134
US

Mailing Address

201 ALHAMBRA CIR
STE 711
CORAL GABLES FL 33134
US



2. Principal Place of Business

2a. Mailing Address

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State, Apt. #, etc.

State, Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

LYONS, MARSHA L.
201 ALHAMBRA CIR.
STE 711
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

11/12/1975

3a. Date of Last Report

02/02/1995

4. FEI Number

59-1704240

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

10. Name and Address of New Registered Agent

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 Sections 607.0505 and Florida Statutes.

SIGNATURE

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OFFICERS AND DIRECTORS

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ELLIOTT, PHILLIP
201 ALHAMBRA CIR, STE 711
CORAL GABLES FL

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 officer 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 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/96

3055671700

CR2E034 (12/95)