FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # 643784 (2)

1. Corporation Name
AABCO MORTGAGE LOANS AND INVESTMENTS, INC.

Principal Place of Business	Mailing Address
111 SECOND AVENUE N.E. SUITE 1000 ST. PETERSBURG 33701	111 SECOND AVENUE N.E. SUITE 1000 ST. PETERSBURG 33701

3. Date Incorporated or Qualified: 11/01/1979
3a. Date of Last Report: 06/14/1995

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2739163 ☐ 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

PHILIPS, CHARLES F., JR.
111 SECOND AVE. NE
STE 1000
ST. PETERSBURG FL 33701

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 ______

12. OFFICERS AND DIRECTORS

TITLE	DPC	☐ DELETE
NAME	PHILIPS, CHARLES F., JR	
STREET ADDRESS	111 SECOND AVE. NE #1000	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	VD	☐ DELETE
NAME	THEIL, RICHARD	
STREET ADDRESS	111 SECOND AVE NE #1000	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	VD	☐ DELETE
NAME	SCARPETTA, ROBERT	
STREET ADDRESS	111 SECOND AVE. NE #1000	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	DVS	☐ DELETE
NAME	TRIPP, DANIEL L.	
STREET ADDRESS	111 SECOND AVE. NE #1000	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	D	☐ DELETE
NAME	GAUGHAN, PATRICK	
STREET ADDRESS	111 SECOND AVE NE #1000	
CITY-ST-ZIP	ST PETERSBURG FL	
TITLE	D	☐ DELETE
NAME	COMEGYS, LEE	
STREET ADDRESS	111 SECOND AVE NE #1000	
CITY-ST-ZIP	ST PETERSBURG FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	KOEGEL, JOHN A.	
1.3 STREET ADDRESS	105 Live Oaks Garden, Ste 129	
1.4 CITY-ST-ZIP	Casselberry, FL 32707	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		
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		

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14. I do hereby certify that the information supplied with this filing is 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 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: [signature] EVP Robert N. Scarpetta 2/1/96 (813) 821-5050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #