

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
FILED**

95 JUN 20 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900001519939
-06/21/95--01104--024
DO NOT WRITE IN THIS SPACE ***8.75

CORPORATION ANNUAL REPORT 1995

FLORENDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727253 (7)
1. Corporation Name
NATIONAL ASSOCIATION OF MORTGAGE BROKERS, INC.

Principal Place of Business: 706 E. Bell Road, Suite 101, Phoenix, AZ 85022
Mailing Address: 706 E. Bell Road, Suite 101, Phoenix, AZ 85022

3. Date Incorporated or Qualified: 08/23/1973
3a. Date of Last Report: 03/30/1994
4. FEI Number: 59-1673989
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
TOMKO, STEVEN R., JR.
1836 LAKEVIEW RD.
CLEARWATER, FL 34624

10. Name and Address of New Registered Agent
81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): 100001519941
83 City: FL
84 City: _____
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: _____
NOTE: Registered Agent signature required when constituting

12. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------------|
| TITLE | P |
| NAME | MORROW, TERRY J. |
| STREET ADDRESS | N MULBERRY ST. |
| CITY- ST- ZIP | BANDERA, TX |
| TITLE | PE |
| NAME | WINSLOW, GARY |
| STREET ADDRESS | 1200 112th AVE NE C-250 |
| CITY- ST- ZIP | BELLEVUE, WA |
| TITLE | VP |
| NAME | ECK, CHARLES |
| STREET ADDRESS | 870 E. HIGGINS RD. #132 |
| CITY- ST- ZIP | SCHAUMBURG, IL |
| TITLE | D |
| NAME | KNIFF, STACEY L. |
| STREET ADDRESS | 402 W BROADWAY 12TH FL. |
| CITY- ST- ZIP | SAN DIEGO, CA |
| TITLE | P |
| NAME | SISK, BARBARA A. |
| STREET ADDRESS | 5930 LBJ FREEWAY, #458 |
| CITY- ST- ZIP | DALLAS, TX |
| TITLE | M |
| NAME | HOOGENDYK, MICHAEL J. |
| STREET ADDRESS | 706 E. BELL RD., #101 |
| CITY- ST- ZIP | PHOENIX, AZ |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|------------------------------|--|
| 1 1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1 2 NAME | GAFFNEY, SCOTT, JR. | |
| 1 3 STREET ADDRESS | 4350 E. CAMELBACK RD., #1006 | |
| 1 4 CITY- ST- ZIP | PHOENIX, AZ | |
| 2 1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2 2 NAME | LEWIS, SUZANNE | |
| 2 3 STREET ADDRESS | 1809 HWY 199 N, SUITE B | |
| 2 4 CITY- ST- ZIP | ASHLAND, OR | |
| 3 1 TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3 2 NAME | ECK, CHARLES | |
| 3 3 STREET ADDRESS | 870 E. HIGGINS RD., #132 | |
| 3 4 CITY- ST- ZIP | SCHAUMBURG, IL | |
| 4 1 TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4 2 NAME | LINES, GENE L. | |
| 4 3 STREET ADDRESS | 931 E. SOUTHERN, #106 | |
| 4 4 CITY- ST- ZIP | MESA, AZ 85214-2040 | |
| 5 1 TITLE | V | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5 2 NAME | SISK, BARBARA A. | |
| 5 3 STREET ADDRESS | 5930 LBJ FREEWAY, #458 | |
| 5 4 CITY- ST- ZIP | DALLAS, TX | |
| 6 1 TITLE | M | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6 2 NAME | WAAS, ANDREA | |
| 6 3 STREET ADDRESS | 706 E. BELL RD., #101 | |
| 6 4 CITY- ST- ZIP | PHOENIX, AZ | |

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 110.07(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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Andrea S. Waas 5-17-95 612-992-6181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date System Issue #