

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

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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **834769** (2)  
1. Corporation Name  
**J.I. KISLAK MORTGAGE CORPORATION OF NEW JERSEY**



Principal Place of Business Mailing Address  
**C/O HOWARD J. BRAFMAN**  
**7900 MIAMI LAKES DR. W.**  
**MIAMI LAKES FL 33016-5897**

3. Date Incorporated or Qualified <b>07/30/1975</b>	3a. Date of Last Report <b>04/17/1995</b>
4. FEI Number <b>22-1474657</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
FILES UNDER FEIN #22-1039750	

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
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9. Name and Address of Current Registered Agent

**BRAFMAN, HOWARD J.**  
**7900 MIAMI LAKES DR. W.**  
**MIAMI LAKES FL 33016**

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	CD	<input type="checkbox"/> DELETE
NAME	KISLAK, JAY I	
STREET ADDRESS	7900 MIAMI LAKES DRIVE WEST	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	PCOO	<input type="checkbox"/> DELETE
NAME	GARLOCK EMMETT R.	
STREET ADDRESS	7900 MIAMI LAKES DR W	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	DSVS	<input type="checkbox"/> DELETE
NAME	BRAFMAN, HOWARD J.	
STREET ADDRESS	7900 MIAMI LAKES DR WEST	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	VAS	<input checked="" type="checkbox"/> DELETE
NAME	PARRA, OLGA E.	
STREET ADDRESS	14160 PALMETTO FRONTAGE RD	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	FLEISCHMAN, DAVID H	
STREET ADDRESS	7900 MIAMI LAKES DRIVE WEST	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	EV	<input checked="" type="checkbox"/> DELETE
NAME	CHRISTIE, DORIS	
STREET ADDRESS	7900 MIAMI LAKES DR. W.	
CITY-ST-ZIP	MIAMI LAKES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

000001795450  
-04/26/96--01014--007  
\*\*\*200.00

SEE EXHIBIT "A" ATTACHED

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD J. BRAFMAN Senior Vice President

Date

4/15/96

Daytime Phone #

(305) 364-4213

CR2E034 (12/95)

4.2596

## EXHIBIT "A"

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DIRECTORS AND OFFICERS  
OF  
J. I. KISLAK MORTGAGE CORPORATION OF NEW JERSEY

NAME	TITLE	ADDRESS
JAY I. KISLAK ✓	CHAIRMAN OF THE BOARD & DIRECTOR	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
EMMETT R. GARLOCK ✓	PRESIDENT & CHIEF OPERATING OFFICER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
HOWARD J. BRAFMAN ✓	DIRECTOR, SENIOR VICE PRESIDENT & SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
JAMES P. GROSS ✓	DIRECTOR, SENIOR VICE PRESIDENT & CHIEF FINANCIAL OFFICER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
KENNETH S. BIALY	SENIOR VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
HERBERT H. SLATTERY, JR.	SENIOR VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
ALBERT M. CAMEN	VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
CAROL A. FENELLO	VICE PRESIDENT & ASSISTANT SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
LOIS F. KATZ	VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
DEBRA C. OTTO	VICE PRESIDENT & CONTROLLER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
DAVID H. FLEISCHMAN ✓	TREASURER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
THOMAS BARTELMO	ASSISTANT VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
BARBARA GAITER	ASSISTANT VICE PRESIDENT & ASSISTANT SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016