## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 845398

(7)

MIDLAND MORTGAGE CORPORATION

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**FILED** 

May 07 1997 8:00am

Secretary of State

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Prinoipal Place of Business Mailing Address					4 100(01 101)4 01097 01109 FAIRS 1839	r noeins eneis miede Orian kiels brûd hûls bûls ditter ditter ditter ditter bindi kindir fildit (Adl			
1031 W MORSE BV STE 305 1031 W MORSE BV STE 30 WINTER PARK FL 32789 WINTER PARK FL 32789-37									
					3. Date Incorporated or Qualifi 03/05/1980		Date of Last R /01/1996	Report	
	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applie			
21		26	6			38-1233187 Not Applie			
Suite, Apt.	#, etc.	Suito, Apt #, etc.			5. Certificate of Status Desired	5. Certificate of Status Desired See Sequired Fee Required			
City & State City & State				6. Election Campaign Financing \$5.00 May			May Be		
23		28			Trust Fund Contribution Added to Fees				
Zip	<b>lip</b> Country Zip		Country		8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30		Florida Statules	Yes 🗌 No			
	9. Name and Address of Curre	nt Registered Agent		T	10. Name and Address of Nev	r Registered	Agent		
	ULTON, LESLEY		8	1 Name				ļ	
	1 W. MORSE BLVD. Te 300		8:	2 Street	Address (P.O. Box Number is Not Acceptable)				
	TER PARK, FL 32789		8:	3					
			8			FL	_   -   '	Code	
Oπice or s	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the obtig	e of Florida. Such change was i	authorized t	ov the con	corporation submits this statement for t poration's board of directors. I hereby a	ne purpose o acept the ap	of changing it pointment as	ts registered registered	
SIGNATURE	0								
12.				gent signature	required when reinstating)  ADDITIONS/CHANGES TO O	DATE SEIGEDS ANI	D DIDECTOR	SCINI 45	
TITLE	DS OF TOUR AND	DELETE	13.		Socretary and Treasu		Change	Addition	
NAME	MOULTON, LESLEY		1.2 NAME		secretary our trease	M CI	Change	L Addition	
STREET ADDRESS	1031 W MORSE BV 300			T ADDRESS					
CITY-ST-ZIP	WINTER PARK FL 32789		14 CITY-						
TITLE	DP	DELETE	21 THLE				Change	Addition	
NAME	BARNES, JAMES T., JR.	F	2.2 NAME				C) Onlings		
STREET ADDRESS	1031 W MORSE BV 300			T ADDRESS					
CITY-ST-ZIP	WINTER PARK FL 32789		2 4 CITY						
TITLE	AS	DELETE	31 TITLE				Change	Addition	
NAME	AMERMAN, JOHN	7 -	3.2 NAME						
STREET ADDRESS	2290 1ST NAT'L BLDG			1 ADDRESS					
CITY-ST-ZIP	DETROIT MI 48226		3.4. CITY						
TITLE		DELETE	4.1 THLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME			4. 2 NAM	E					
STREET ADDRESS			4.8 STREE	1 ADDRESS					
CITY-ST-ZIP			4.4 CITY-						
TITLE		DELETE	5.1 TITLE	07 111			Change	Addition	
NAME			5.2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			5.4 CITY-						
TALE		DELETE	6.1 TITLE	V 10			Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS				1 ADDRESS					
CITY-ST-ZIP			6.4 CITY-						
			0.4 0117-	OT THE					

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 lam 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.