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Jan 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 848152 (5)  
1. Corporation Name  
MORTGAGE AND SECURITY INVESTMENT COMPANY



Principal Place of Business  
606 CYPRESS GARDENS ROAD  
C/O STANLEY C. DAVIS  
WINTER HAVEN FL 33880

Mailing Address  
606 CYPRESS GARDENS ROAD  
C/O STANLEY C. DAVIS  
WINTER HAVEN FL 33880

3. Date Incorporated or Qualified  
02/03/1981

3a. Date of Last Report  
01/26/1996

4. FEI Number  
59-1389304

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

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

9. Name and Address of Current Registered Agent

DAVIS, DENNIS G.  
223 NASSAU ROAD  
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
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  
Signature typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STD  
GEE, JUANITA V  
1926 FOXHOLLOW DR  
AUBURNDAL, FL 00000

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VD  
EVANS, KAREN D  
3801 THRONHILL RD.  
WINTER HAVEN, FL 00000

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PD  
DAVIS, DENNIS G  
223 NASSAU ROAD  
WINTER HAVEN, FL 00000

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
WITTENBERG, BARBARA  
142 LAKE RING DR.  
WINTER HAVEN FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
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  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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: DENNIS G. DAVIS  
DENNIS G. DAVIS OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/97 (941) 294-3254

Date Daytime Phone # 0524442

CR2E034 (9/96)