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FILED
May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 852984

(4)

1. Corporation Name

CHASE MORTGAGE SERVICES, INC.



Principal Place of Business

4915 INDEPENDENCE PARKWAY
TAMPA FL 33634-4540

Mailing Address

4915 INDEPENDENCE PARKWAY
TAMPA FL 33634-7540
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

3 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

05/25/1982

3a. Date of Last Report

01/30/1996

4. FEI Number

22-2318907

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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

OFFICERS AND DIRECTORS

☐ DELETE

TITLE DV
NAME HALL, DEANE W.
STREET ADDRESS 4915 INDEPENDENCE PKWAY
TY-ST-ZIP TAMPA FL

TITLE CD
NAME MIRRO, RICHARD A.
STREET ADDRESS 4915 INDEPENDENCE PKWY
TY-ST-ZIP TAMPA FL

TITLE VS
NAME JACOBS, ROBERT, J
STREET ADDRESS 4915 INDEPENDENCE PKWY
TY-ST-ZIP TAMPA FL

TITLE DVT
NAME MARZOL, ADOLFO F.
STREET ADDRESS 4915 INDEPENDENCE PKWY
TY-ST-ZIP TAMPA FL

TITLE CD
NAME KOONS, FRED B.
STREET ADDRESS 4915 INDEPENDENCE PKWY
TY-ST-ZIP TAMPA FL

TITLE DV
NAME COOPER, SAMUEL H.
STREET ADDRESS 300 TICE BLVD 3RD FLOOR N
TY-ST-ZIP WOODCLIFF LAKE NJ

☒ DELETE

☒ DELETE

☒ DELETE

☒ DELETE

☒ DELETE

☐ DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

V

Gregg Gorman
343 Thornall Street
Edison, NJ 08837

V/S

Marguerite Sheehan
343 Thornall Street
Edison, NJ 08837

V/T

Glenn Mouridy
343 Thornall Street
Edison, NJ 08837

C/D

Thomas Jacob
343 Thornall Street
Edison, NJ 08837

SIGNATURE: Gregg Gorman, Vice President

5/9/97

(908) 205-0600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)