

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

FILED  
Apr 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F50562 (0)  
1. Corporation Name  
FLORIDA HOMELOAN CORPORATION



Principal Place of Business 8021 PHILLIPS HWY S1 JACKSONVILLE FL 32256 US	Mailing Address 8021 PHILLIPS HWY S1 JACKSONVILLE FL 32256-7460 US
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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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3. Date Incorporated or Qualified 10/16/1981	3a. Date of Last Report 04/01/1996
4. FEI Number 59-2703889	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GARY, DYTRYCH & RYAN 701 US ONE, STE 402 NORTH PALM BCH FL 33408	
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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
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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	D
NAME	CHARLES, MARTYN P.
STREET ADDRESS	393 TEQUESTA DRIVE
CITY-ST-ZIP	TEQUESTA FL
TITLE	D
NAME	GARY, JOHN W. III
STREET ADDRESS	701 U.S. HWY. 1 S-402
CITY-ST-ZIP	NORTH PALM BCH. FL
TITLE	DPT
NAME	MORCOM, THOMAS A.
STREET ADDRESS	441 BARRINGTON OAKS DR.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	CD
NAME	GINN, DAVID F.
STREET ADDRESS	10459 SYLVAN LN., W.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	D
NAME	GINN, SHANNON
STREET ADDRESS	5222 DESERT VIXEN RD
CITY-ST-ZIP	PALM BCH GARDENS FL
TITLE	VP
NAME	GINN, JUDITH L.
STREET ADDRESS	10459 SYLVAN LN. W.
CITY-ST-ZIP	JACKSONVILLE 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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	701 U.S. Hwy 1 S-105
5.4 CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: \_\_\_\_\_ DATE: 4/17/97 9:47 733-1255

CR2E034 (9/96)