

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 16, 1999 8:00 am  
Secretary of State

03-16-1999 90060 045 \*\*\*158.75

DOCUMENT # F73799

1. Corporation Name

STATE MORTGAGE & INVESTMENT CORP.



Principal Place of Business

3300 NORTH PACE BLVD  
SUITE 310  
PENSACOLA FL 32505  
US

Mailing Address

% CHARLES N. RITTENHOUSE  
3300 N PACE BLVD. STE 210  
PENSACOLA FL 32505  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/23/1982

4. FEI Number

59-2193459

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.



Yes ☐ No

2. Principal Place of Business

21 18 EAST BURGESS ROAD  
Suite, Apt. #, etc.

2a. Mailing Address

27 18 EAST BURGESS ROAD  
Suite, Apt. #, etc.

City & State

23 PENSACOLA, FL

City & State

28 PENSACOLA, FL

Zip Country

24 32503 25 USA

Zip Country

29 32503 30 USA

9. Name and Address of Current Registered Agent

RITTENHOUSE, CHARLES N.  
3300 NORTH PACE BLVD  
SUITE 310  
PENSACOLA FL 32505

10. Name and Address of New Registered Agent

81 Name

RITTENHOUSE, CHARLES N.

82 Street Address (P.O. Box Number is Not Acceptable)

18 EAST BURGESS ROAD

83

84 City

PENSACOLA

FL

85 Zip Code

32503

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

*Charles N. Rittenhouse*  
Signature, typed or printed name of registered agent and title if applicable.

CHARLES N. RITTENHOUSE - PRESIDENT 3/13/99  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I 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, with all other like empowered.

SIGNATURE: *Charles N. Rittenhouse*  
Signature, typed or printed name of signing officer or director

3/13/99 850-476-9484  
Date Daytime Phone #

CR2E034 (11/98)