PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

F9300002470 (3)

KFC MORTGAGE LOANS, INC.

Principal Place of Business Mailing Address									i	ENDISON HIND FOIGO HINE ORIEN DI	IANI WUNIN EBANI I		
250 CARPENTER FREEWAY IRVING TX 75062-2729					P O BOX 660237 CORP TAX DEPT DALLAS TX 75266-0237			2 Date	legerograted or Qualified	Tan Do	te of Last F	Popod	
					US			l l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			от Last нероп I/12/1995	
Principal Place of Business 2a					, Malling Address			4. FEI N		L		Applied For	
21					26					61-1051005			Not Applicable
22					Suite, Apt. #, etc.			5. Certif	icate of Status Desired			Additional Required	
23	City & State			28	City & State			l l	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip			Country		Zip		untry		8. This o	8. This corporation has liability for intangible tax under s 199.032,			
24	·		25	29	<u></u>	30	30				s No		
9, Name and Address of Current Registered Agent								Name	10. Nam	e and Address of New	Registered	Agent	
THE BREUTIAN HALL AARDARATION OVATER IN							81						
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET							82 Street Address (P.O. Bo.			x Number is Not Accepta	able)		
SUITE 105							83						
	TALLAHA	ASSEE FL	32301				84	City			FL	85 Z	p Code
 Pursuant to the provisions of Sections 607.0502 and €07.1508, Florida Statutes, the or registered agent, or both, in the State of Florida. Such change was authorized by familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 								named co oration's	orporation submits board of directors	s this statement for the p s. I hereby accept the ap	urpose of ch pointment a	nanging its s registered	registered office d agent. I am
SIGNATURE													
Signature, typed or printed name of registered againt and blie if applicable. (NOTE: Register 12. OFFICERS AND DIRECTORS 13							o Ager	it signature i		!! TIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	DRS IN 12
TITL		PD			DELETE		TITLE		Director/I			Change	Addition
NAM	IE .	BAKER, H. CHRIS				1.2 NAN			John E. G	odfrey			
STR	EET ADDRESS		300 WEST VINE STREET, 7TH FLOOR				1.3 STREET ADDRESS			nter Freeway			
CITY	'-\$1-7IP	LEXING	TON KY 40507			1.4 0	DITY-S	ST-ZIP	Irving, T	X 75062			
TITL	E	AVAS			☐ DELETE	2 1	TITLE					Change	Addition
		e, patrick j			221								
			CARPENTER FRE	EWAY			2 3 STREET ADDRESS						
	'-ST-ZIP	IRVING	TX		FT be tre		HY-S	ST-ZIP					
TITL		S	THIOTIME		☐ DELETE		TITLE					Change	Addition
NAM			TIMOTHY M	THE			NAME						
	EET ADDRESS		CARPENTER FRE	EWAY				T ADDRESS					
TITL	'-ST-7IP	VT	TX 75062		DELFTE		OTY-S THILE	1 - ZIP	 		 	☐ Change	Addition
NAM			S, JOHN F				NAME					☐ onange	L Vacation
	EET ADDRESS		O, JOHN F CARPENTER FRE	EWAV				AUUDEGG					
'			IRVING TX				3 STHEET ADDRESS 4 CHTY-ST-ZIP						
TITL		D	<u> </u>		K) DELFTE		TITLE	51-211	Director			Change	X7 Addition
NAM		-	MS, BOBBY D		***		NAME		Daniel H.	Fowler			42.3
1	EET ADDRESS		CARPENTER FRE	EWAY				ADDRESS		nter Freeway			
l	-SI-ZIP	IRVING						ST - ZIP	Irving, T				
THIL		D			🚺 DELETE		TITLE		Director		···	Change	X Addition
NAM	IE	_	AND, WALTER B				NAME		James S. J	Iohneon		•	
l	EE1 ADDRESS		CARPENTER FRE	EWAY				ADDRESS		iter Freeway			
l	r-S1-ZIP	IRVING TX 75062						ST-ZIP	Irving, TX				
4.4	Lala harabu	nodif. that	the information arms	نجله طانيي لومناه	- Fr 1 1 1 1 1	محرم لم مرام م	1 -1		14 4 4	Alam at the Company of the	0.03(0)(1) E		

I. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick J. Greene. Asst. VP & Asst.

4/25/96 Date

(214) 541-4000

Daylime Phone #

CR2E034 (12/9