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FILED

Feb 28 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 # F93000002528 (8)

1. Corporation Name

RESOURCE BANCSHARES MORTGAGE GROUP, INC.



Principal Place of Business

7909 PARKLANE ROAD
COLUMBIA SC 29223
US

Mailing Address

7909 PARKLANE ROAD
COLUMBIA SC 29223-3666
US

3. Date Incorporated or Qualified

05/28/1993

3a. Date of Last Report

07/03/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

4. FEI Number

57-0962375

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 ROAD
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 is typewritten or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	SEBASTIAN, EDWARD J	
STREET ADDRESS	1901 MAIN STREET, SUITE 650	
CITY-ST-ZIP	COLUMBIA SC 29201	
TITLE	VCD	<input type="checkbox"/> DELETE
NAME	JOHNSON, DAVID W JR	
STREET ADDRESS	7909 PARKLANE ROAD	
CITY-ST-ZIP	COLUMBIA SC	
TITLE	VCD	<input checked="" type="checkbox"/> DELETE
NAME	SHELTON, LEE E	
STREET ADDRESS	7909 PARKLANE ROAD	
CITY-ST-ZIP	COLUMBIA SC	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	TINKLER, DAVID K	
STREET ADDRESS	7909 PARKLANE ROAD	
CITY-ST-ZIP	COLUMBIA SC	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	CURRIE, JOHN W	
STREET ADDRESS	1301 GERVAIS STREET	
CITY-ST-ZIP	COLUMBIA SC 29211	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SEV/CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Steven Herbert	
1.3 STREET ADDRESS	7909 Parklane Road	
1.4 CITY-ST-ZIP	Columbia, SC 29223	
2.1 TITLE	SEV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Richard Duncan	
2.3 STREET ADDRESS	7909 Parklane Road	
2.4 CITY-ST-ZIP	Columbia, SC 29223	
3.1 TITLE	SV GC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Jordan Dorchuck	
3.3 STREET ADDRESS	7909 Parklane Road	
3.4 CITY-ST-ZIP	Columbia, SC 29223	
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 type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
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. I am attaching with an address.

SIGNATURE:

SIGNATURE AND TITLE FOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David W. Johnson, Jr., Vice Chairman

February 25, 1997

(803) 741-3000

Date

Daytime Phone #

0010600

CR2E034 (9/96)