2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F94000001179 02-05-2004 90015 022 ***150.00 **FSC MORTGAGE CORPORATION** Mailing Address Principal Place of Business 1717 BABCOCK BOLUVARD 1717 BABCOCK BOLUVARD PITTSBURGH, PA 15209 PITTSBURGH, PA 15209 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01132004 Cha-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 25-1449605 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION 1200 SOUTH PINE ISLAND ROD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 1 -21-8 SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE FiLE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Addition Delete TITLE TITLE Dana Johnson MAGGIO, JOSEPH W NAME NAME 1717 Babcock Blvd. 1717 BABCOCK BLVD STREET ADDRESS STREET ADDRESS Pittsburgh, PA 15209 PITTSBURGH, PA 15209 CITY-ST-7IP CITY-ST-ZIP √ Change ☐ Addition TITLE Delete TITLE Randy Johnson NAME LOIS, MAGGIO 1717 Babcock Blvd. 1717 BABCOCK BLVD STREET ADDRESS STREET ADDRESS Pittsburghy-PA 15209- - -CITY-ST-ZIP PITTSBURGH, PA 15209 CITY-ST-ZIP Change Delete TITLE Addition TITLE Dana Johnson DONNA, JOHNSON NAME NAME 1717 BABCOCK BLVD STREET ADDRESS STREET ADDRESS PITTSBURGH, PA 15209 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAMÉ NAME STREET ADDRESS .STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - Delete --- -TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Cobigs (his steep, is diamen, rig that could all a lossy the section the NAME LO SEC 1 2012 Garage 2012 (1997) NAME かたたい STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

FILED Feb 05, 2004 8:00 am

Secretary of State