## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

1996

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #  1. Corporation Name	F94000001615	(3
WESTERN FREEDOM	MORTGAGE CORPORATION	

3a. Date of Last Report 05/01/1995

3. Date Incorporated or Qualified 03/30/1994

Principal Place of Business	Mailing Address
2363 S. FOOTHILL DRIVE SALT LAKE CITY UT 84109	2363 S. FOOTHILL DRIVE SALT LAKE CITY UT 84109
US	US

· · · a	Principal Place of Busin	ness	2a	<ul> <li>Mailing Address</li> </ul>			4. FEI Number Applied For	
21			26				87-0421643 Not Applicable	, ]
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required	
23	City & State	··•• · · · · · · · · · · · · · · · · ·	28	City & State			6. Election Canipaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
24	Ζφ	Country 25	29	Zip	30	untry	Py 8. This corporation has liability for intengible tax under s 199.032, Florida Statutes ☐ Yes ☐ No	
	Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
	C T CORPORAT	ION SYSTEM				81		
	1200 SOUTH PINE ISLAND ROAD					82		
	PLANTATION FL	33324				83		
						84	4 City B5 Zip Code	

11. Pursuant to frie 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 .	Stur of mentypical or principal name of registrates aspect and till, if app	STATE AIGH			
12.	OF HOERS AND DIRECT		: Registered Agent signature required	d when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
[:1[]	P	DELETE	1. 1 TITLE	☐ Cha	
NAME	gates, kevin		1.2 NAME	_	
STREET ADDRESS	2363 SOUTH FOOTHILL DRIVE		13 STREET ADDRESS		
CHY+SI+ZiP	SALT LAKE CITY UT		1.4 CITY-ST-ZIP		
1014	EVP	X DELFTE	2 1 TITLE	☐ Cha	nge Addition
NAM?	FROST, NORMAN L:		2.2 NAME	<del>-</del>	
STREET ADDRESS	<del>2363 SOUTH FOOTHILL DR</del> IVE		2 3 STREET ADDRESS		
CHY ST-Zir	<del>SALT LAKE CITY UT</del>		2 4 CITY-ST-ZIP		
TILE	EVP	DELETE	3 1 TITLE	☐ Cna	nge 🔲 Addition
NAME	Turville, Terry		3 2 NAME		-
STREET ADDRESS	2363 SOUTH FOOTHILL DRIVE		3 3 STREET ADDRESS		
CHY-S1 ZIP	SALT LAKE CITY UT		3.4 CITY - ST - ZIP		
TillE	6VP	DELFTE	4. 1 TITLE	☐ Cha	nge 🔲 Addition
NAM:	GNEHM, SUZANNE		4.2 NAME		
STREET ADDRESS	2363 SOUTH FOOTHILL DRIVE		4.3 STREET ADDRESS		
CITY-S1-ZIP	SALT LAKE CITY UT		4.4 City - St - ZiP		
THE	EVP	DELETE	5 1 TITLE	☐ Cha	nge 🔲 Addition
NAME:	reedy, terrie		5 2 NAME		
STREET ADDRESS	2363 SOUTH FOOTHILL DRIVE		5 3 STREET ADDRESS		
C(1y - 51 - Z(F)	SALT LAKE CITY UT		5 4 CITY - ST - ZIP		
MUF		DELETE	6 1 TITLE	☐ Cha	nge Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CIFY ST ZIF			6 4 CITY - ST- ZIP		

14. Lido hereby cortify 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 of 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 of 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 add 4ss.

SIGNATURE:

01/16/96

(801) 273-2729