

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

FILED

May 06 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 # F96000000561 (8)

1. Corporation Name

GRUBB & ELLIS MORTGAGE GROUP, INC.



Principal Place of Business

ONE MONTGOMERY ST
TELESIS TOWER, 9TH FLOOR
SAN FRANCISCO CA 94104

Mailing Address

ONE MONTGOMERY ST
TELESIS TOWER, 9TH FLOOR
SAN FRANCISCO CA 94104-4505

2. Principal Place of Business

21 Two Embarcadero Center

Suite, Apt. #, etc.

22 Suite 200

City & State

23 San Francisco, CA

Zip

24 94111

Country

25 U.S.A.

2a. Mailing Address

26 Two Embarcadero Center

Suite, Apt. #, etc.

27 Suite 200

City & State

28 San Francisco, CA

Zip

29 94111

Country

30 U.S.A.

3. Date Incorporated or Qualified

01/29/1996

3a. Date of Last Report

4. FEI Number

94-3225933

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ROYSTER, PHILLIP D

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

TITLE VCFO ☒ DELETE

NAME HANLON, ROBERT J JR

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

TITLE D ☒ DELETE

NAME HANLON, ROBERT J JR

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

TITLE VS ☐ DELETE

NAME WALNER, ROBERT J

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

TITLE V ☐ DELETE

NAME BENNEWATE, RONALD T

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

TITLE V ☐ DELETE

NAME MORROW, DONALD D

STREET ADDRESS ONE MONTGOMERY ST, TELESIS TOWER, 9TH FL
SAN FRANCISCO CA 94104

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SVP/D ☒ Change ☐ Addition

1.2 NAME Royster, Phillip D.

1.3 STREET ADDRESS 500 North State College Blvd., Suite 100
Orange, CA 92668

1.4 CITY - ST - ZIP

2.1 TITLE SVP/CFO ☒ Change ☐ Addition

2.2 NAME Parker, Brian

2.3 STREET ADDRESS 2215 Sanders Road, 4th Floor
Northbrook, IL 60062

2.4 CITY - ST - ZIP

3.1 TITLE P/D ☐ Change ☒ Addition

3.2 NAME Young, Neil

3.3 STREET ADDRESS 2215 Sanders Road, 4th Floor
Northbrook, IL 60062

3.4 CITY - ST - ZIP

4.1 TITLE SVP/S ☒ Change ☐ Addition

4.2 NAME Walner, Robert J.

4.3 STREET ADDRESS 2215 Sanders Road, 4th Floor
Northbrook, IL 60062

4.4 CITY - ST - ZIP

5.1 TITLE VP/S ☐ Change ☒ Addition

5.2 NAME Vanairsdale, Carol

5.3 STREET ADDRESS Two Embarcadero Center, Suite 200
San Francisco, CA 94111

5.4 CITY - ST - ZIP

6.1 TITLE VP ☒ Change ☐ Addition

6.2 NAME Morrow, Donald D.

6.3 STREET ADDRESS 2390 E. Camelback Road, Suite 100
Phoenix, AZ 85016

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, or on an attachment with an address.

SIGNATURE:

Carol Vanairsdale
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/97

(415) 835-1322

Date

Daytime Phone #

CR2E034 (9/96)