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FILED

Jan 27 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 # F96000001284 (6)

1. Corporation Name
EMERGENT MORTGAGE CORP.



Principal Place of Business

208 GARVIN ST
PICKENS SC 29671

Mailing Address

208 GARVIN ST
PICKENS SC 29671-2478

3. Date Incorporated or Qualified

03/12/1996

3a. Date of Last Report

2. Principal Place of Business

21 50 Datastream Plaza

22 Suite 201

23 Greenville, SC

24 29605

Country

25 Greenville

2a. Mailing Address

26 50 Datastream Plaza

27 Suite 201

28 Greenville, SC

29 29605

Country

30 Greenville

4. FEI Number

~~59-3324910~~ 57-3324910

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 607.1503, 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 of officer or director, or registered agent, or both)

(Signature of registered agent, or both, if registered agent is not the same as the officer or director)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CCEO	☐ DELETE
NAME	GIDDENS, KEITH	
STREET ADDRESS	208 GARVIN ST	
CITY-STATE-ZIP	PICKENS SC 29671	
TITLE	VCP	☐ DELETE
NAME	CANUPP, DENNIS	
STREET ADDRESS	208 GARVIN ST	
CITY-STATE-ZIP	PICKENS SC 29671	
TITLE	SD	☐ DELETE
NAME	COX, J. PHIL	
STREET ADDRESS	208 GARVIN ST	
CITY-STATE-ZIP	PICKENS SC 29671	
TITLE	TD	☐ DELETE
NAME	MAST, KEVIN	
STREET ADDRESS	15 S. MAIN ST, SUITE 750	
CITY-STATE-ZIP	GREENVILLE SC 29601	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	CCEO	☒ Change ☐ Addition
12 NAME	GIDDENS, KEITH	
13 STREET ADDRESS	15 S. Main St., Suite 750	
14 CITY-STATE-ZIP	Greenville, SC 29601	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
31 TITLE	SD	☒ Change ☐ Addition
32 NAME	Cox, J. Phil	
33 STREET ADDRESS	50 Datastream Plaza, Suite 201	
34 CITY-STATE-ZIP	Greenville, SC 29605	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE	D	☐ Change ☒ Addition
52 NAME	Kunst, John	
53 STREET ADDRESS	208 Garvin St	
54 CITY-STATE-ZIP	Pickens, SC 29671	
61 TITLE	D	☐ Change ☒ Addition
62 NAME	Roberson, George	
63 STREET ADDRESS	50 Datastream Plaza, Suite 100	
64 CITY-STATE-ZIP	Greenville, SC 29605	

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 contained 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 an amendment to an address.

SIGNATURE:

J.P. Cox

J.P. Cox Secretary

1/16/97

864-422-5736

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0498304

CR2E034 (9/96)