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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000001432 (1)

AMERICAN EQUITY MORTGAGE, INC.

Principal Place of Business Mailing Address 111 WESTPORT PLAZA. SUITE 101 111 WESTPORT PLAZA, SUITE 101 ST. LOUIS MO 63146 ST. LOUIS MO 63148-3013 3. Date Incorporated or Qualified 3a. Date of Last Report 03/15/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 43-1602373 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 25 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VINSON, RAY 4300 W. CYPRESS ST., STE. 100 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33607** 83 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 of energistered 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 registored agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change Addition 1.1 TITLE TITLE DAUGHHETEE, DEANNA MM 1.2 NAME 1315 SNAPDRAGON CT. 1.3 STREET ADDRESS STREET ADDRESS ST. LOUIS MO 63146 1.4 CITY - ST - ZIP COY-SI-7-P DELETE Change Addition 2.1 TITLE Trijf 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition THE NAME 32 NAME 3.3 STREET ADDRESS STIME LABORESS 3.4. CITY-SF-ZIP City St Addition DELETE Change Thirti 4.1 TITLE NAM 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP OF Y 51-DELETE 51 TITLE Addition tera MAN 6.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Addition 6.2 NAME 9454 900002189739 -05/23/97--01058--004 6.3 STREET ADDRESS SHEEF LATCHESS 14. Loo 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 emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

13 if changed, or

Deanna Daughhetee, president/4-018-9999

FILED

May 13 1997 8:00am

Secretary of State

0483298