


FILED

Jan 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000001592 (2)
 1. Corporation Name
INVESTORS MORTGAGE ASSOCIATES, INC.

Principal Place of Business 5094 DORSEY HALL DR., STE 205 ELLCOTT CITY MD 21042	Mailing Address 5094 DORSEY HALL DR., STE 205 ELLCOTT CITY MD 21042-7711
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2. Principal Place of Business <div style="border: 1px solid black; padding: 2px;">21</div> Suite, Apt. #, etc. <div style="border: 1px solid black; padding: 2px;">22</div> City & State <div style="border: 1px solid black; padding: 2px;">23</div> Zip <div style="border: 1px solid black; padding: 2px;">25</div> Country <div style="border: 1px solid black; padding: 2px;">24</div>	2a. Mailing Address <div style="border: 1px solid black; padding: 2px;">26</div> Suite, Apt. #, etc. <div style="border: 1px solid black; padding: 2px;">27</div> City & State <div style="border: 1px solid black; padding: 2px;">28</div> Zip <div style="border: 1px solid black; padding: 2px;">29</div> Country <div style="border: 1px solid black; padding: 2px;">30</div>
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9. Name and Address of Current Registered Agent

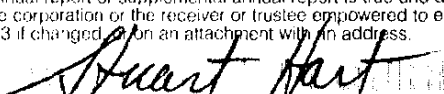
HART, ALAN 440 SOUTH FEDERAL HWY STE 204 DEERFIELD BEACH FL 33441	<div style="border: 1px solid black; padding: 2px;">81</div> Name <div style="border: 1px solid black; padding: 2px;">82</div> Street Address <div style="border: 1px solid black; padding: 2px;">83</div> <div style="border: 1px solid black; padding: 2px;">84</div> City
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida, Such change was authorized by the corporation 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)

OFFICERS AND DIRECTORS	
12. <div style="border: 1px solid black; padding: 2px;">TITLE</div> PDS <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> HART, STUART <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> 37 INTERNATIONAL CIRCLE <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div> OWINGS MILLS MD	13. <div style="border: 1px solid black; padding: 2px;">1.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">1.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">1.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">1.4 CITY - ST - ZIP</div>
<div style="border: 1px solid black; padding: 2px;">TITLE</div> VTS <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> CONTRACT, MARC <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> 8524 HARVEST VIEW CT <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div> ELLCOTT CITY MD	<div style="border: 1px solid black; padding: 2px;">2.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">2.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">2.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">2.4 CITY - ST - ZIP</div>
<div style="border: 1px solid black; padding: 2px;">TITLE</div> <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div>	<div style="border: 1px solid black; padding: 2px;">3.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">3.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">3.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">3.4 CITY - ST - ZIP</div>
<div style="border: 1px solid black; padding: 2px;">TITLE</div> <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div>	<div style="border: 1px solid black; padding: 2px;">4.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">4.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">4.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">4.4 CITY - ST - ZIP</div>
<div style="border: 1px solid black; padding: 2px;">TITLE</div> <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div>	<div style="border: 1px solid black; padding: 2px;">5.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">5.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">5.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">5.4 CITY - ST - ZIP</div>
<div style="border: 1px solid black; padding: 2px;">TITLE</div> <div style="float: right;"><input type="checkbox"/> DELETE</div> <div style="border: 1px solid black; padding: 2px;">NAME</div> <div style="border: 1px solid black; padding: 2px;">STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">CITY - ST - ZIP</div>	<div style="border: 1px solid black; padding: 2px;">6.1 TITLE</div> <div style="border: 1px solid black; padding: 2px;">6.2 NAME</div> <div style="border: 1px solid black; padding: 2px;">6.3 STREET ADDRESS</div> <div style="border: 1px solid black; padding: 2px;">6.4 CITY - ST - ZIP</div>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed on an attachment with an address.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



CR2E034 (9/96)