

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

FILED  
Mar 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005182 (8)

1. Corporation Name

GREAT SOUTHERN MORTGAGE, INC.

Principal Place of Business

2110 POWERS FERRY RD., #440  
ATLANTA GA 30339

Mailing Address

2110 POWERS FERRY RD., #440  
ATLANTA GA 30339

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/07/1996

4. FEI Number

58-2224227

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 218 COMMERCIAL BLVD

Suite, Apt. #, etc.

22 101 B

City & State

23 LAUDERDALE BY THE SEA, FL

Zip

24 33308

Country

25 USA

2a. Mailing Address

26 1640 POWERS FERRY ROAD

Suite, Apt. #, etc.

27 BLDG. 3 SUITE 200

City & State

28 MARIETTA, GA.

Zip

29 30067

Country

30 USA

9. Name and Address of Current Registered Agent

KOWALCHYK, DEAN C.  
1131 E. LAFAYETTE ST., #F  
TALLAHASSEE FL 32301

CHANGED TO →

10. Name and Address of New Registered Agent

81 Name

PAMELA C. FENDRECK

82 Street Address (P.O. Box Number is Not Acceptable)

5295 BUCK LAKE ROAD

83

84

TALLAHASSEE

FL

85

Zip Code  
32311

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

PAMELA C. FENDRECK

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

(NOTE: Registered Agent signature required when reinstating)

3/20/98

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	AKERS, T D SR	
STREET ADDRESS	4019 BRAMBLE CT.	
CITY-ST-ZIP	MARIETTA GA 30062	
TITLE	VSTD	<input type="checkbox"/> DELETE
NAME	JACKEL, PINKI C	
STREET ADDRESS	6050 FORDS RD.	
CITY-ST-ZIP	ACWORTH GA 30101	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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:

PAMELA C. FENDRECK

3/17/98 770 955-0820

CR2E034 (10/97)