SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # F9700005614 (9)

MORTGAGE ALTERNATIVES OF INDIAN RIVER COUNTY, IN

Principal Place of Business 3761 SOUTH 700 EAST SUITE 201 Mailing Address

FILED Jul 08 1998 8:00am Secretary of State



3761 SOUTH 700 EAST SUITE 201 SALT LAKE CITY UT 84107 SALT LAKE CITY UT 84107 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/24/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 84-1373982 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STUBBS, JAMES E 81 1475 23RD AVE SW 62 Box Number is Not Acceptable) VERO BEACH FL 32962 2 P 7 83 84 11. Pursuant to the provisions of sections 607.0582 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 state of Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signalure, typed or of registered agent and little if applicable CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE DELETE Change Addition STUBBS, ROBERT A NAME 1.2 NAME 376 ( SOUTH 700 EAST SUITE 201 STREET ADDRESS 1.3 STREET ADDRESS SALT LAKE CITY UT 84107 1.4 CITY ST ZIP CITY-ST-ZIP TITLE 21 TITLE DELETE \_\_\_ Change \_\_\_ Addition COZZENS, HAL S NAME 2.2 NAME 3761 SOUTH 700 EAST SUITE 201 STREET ADDRESS 2.3 STREET ADDRESS SALT LAKE CITY UT 84107 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 4.1 TITLE \_\_\_ Change DELETE Addition 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filting 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 supply mental 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 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 etta an attachment with an address