

F98000006515

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Twins Mortgage Corp.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: 500002698685-6
-12/01/98--01041--003
*****78.75 *****78.75

Teri Canning
(Name of Person)
Twins Mortgage Corp
(Firm/Company)
4906 NW 65th Way
(Address)
Gainesville, FL 32653
(City/State/Zip)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC - 1 AMID: 43

Should you need to call someone concerning this matter, please call:

Teri Canning at (352) 372-3452
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Twins Mortgage Corp.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Illinois 3. 36-3817351
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 20, 1992 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. estimating 11/5/99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 4906 NW 15th Way
Gainesville, FL 32653
(Current mailing address)

8. mortgage broker
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Teri Canning

Office Address: 4906 NW 15th Way

Gainesville, Florida, 32653
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Teri Canning
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box **NOT** acceptable)

Chairman: Teri Canning

Address: 4906 NW 105th Way
Gainesville, FL 32653

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box **NOT** acceptable)

President: Steven Canning

Address: 4906 NW 105th Way
Gainesville, FL 32653

Vice President: Teri Canning

Address: 4906 NW 105th Way
Gainesville, FL 32653

Secretary: Teri Canning

Address: same as above

Treasurer: Teri Canning

Address: same as above

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Teri Canning
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Teri Canning, VP
(Typed or printed name and capacity of person signing application)

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File Number 5676-400-3

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE



To all to whom these Presents Shall Come, Greeting:

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AID: 43

I, George H. Ryan, Secretary of State of the State of Illinois,

do hereby certify that TWINS MORTGAGE CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MARCH 20, 1992, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS***

EX-1103473
SECRETARY OF STATE



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois this 5TH
day of OCTOBER A.D., 19 98

George H. Ryan
SECRETARY OF STATE