

FILE NOW: FILING FEE AFTER 1/1/96 IS \$220.00

**PROFIT CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Annora B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

G23993

Fortune Mortgage Corporation

Principal Place of Business

P.O. Box 11007
Attn: Corp. Tax
Birmingham, AL 35288

Mailing Address

P.O. Box 11007
Attn: Corp. Tax
Birmingham, AL 35288

3. Date Incorporated or Qualified
2/15/83

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2272403

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23 City & State

28 City & State

6. Election Campaign Financing:
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**James A. Nowak
100 North Tampa Street
Tampa, FL 33602**

81 Name

Kerry Charlet

82

100 North Tampa Street

83

84

Tampa, FL

FL

33602

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

Kerry Charlet

(NOTE: Registered Agent signature required when reinstating)

6/1/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D + P**
STREET ADDRESS **Alfred W. Swan, Jr.**
CITY-ST-ZIP **100 North Tampa St. Suite 3400
Tampa, FL 33602**

TITLE ☐ DELETE

NAME **D + VP**
STREET ADDRESS **Thomas M. McCulley**
CITY-ST-ZIP **100 North Tampa St.
Tampa, FL 33602**

TITLE ☐ DELETE

NAME **T**
STREET ADDRESS **Kerry Charlet**
CITY-ST-ZIP **100 North Tampa St. Suite 3400
Tampa, FL 33602**

TITLE ☐ DELETE

NAME **Asst Treasurer**
STREET ADDRESS **Lynda Kern**
CITY-ST-ZIP **1901 6th Ave North
Birmingham, AL 35288**

TITLE ☐ DELETE

NAME **Asst Treasurer**
STREET ADDRESS **Robert Smith**
CITY-ST-ZIP **1901 6th Ave North
Birmingham, AL 35288**

TITLE ☐ DELETE

NAME **Secretary**
STREET ADDRESS **William Caughran**
CITY-ST-ZIP **1901 6th Ave North
Birmingham, AL 35288**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

700001871867

-06/21/96--01113--004

*****200.00**

14. I do hereby certify that this Florida Annual Report is true and correct and does not include any information that is false or misleading. I further certify that the information included in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 B 24, 25, 26, 27, 28, 29, 30, or on an attachment to this report.

SIGNATURE:

Lynda A. Kern
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 10, 1996

April 30, 1996

205-320-7149