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Apr 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G37617 (9)
1. Corporation Name
PANHANDLE MORTGAGE, INC.



Principal Place of Business Mailing Address
8251 NAVARRE PARKWAY, STE A 8251 NAVARRE PARKWAY, STE A
P O BOX 5217 P O BOX 5217
NAVARRE FL 32566 NAVARRE FL 32566-0217

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 8251 Navarre Pkwy Ste B
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
05/06/1983 02/28/1996
4. FEI Number Applied For
59-2291775 Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
REBHOLZ, MARY E
8251 NAVARRE PARKWAY, STE B
NAVARRE FL 32566

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 responsible for and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *MARY E. Rebholz* DATE 4/15/97
Signature of registered agent or principal officer and true if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE S ☐ DELETE
NAME REBHOLZ, MARY E
STREET ADDRESS 2701 CREEKS EDGE LANE
CITY-ST-ZIP NAVARRE FL
TITLE P ☐ DELETE
NAME REBHOLZ, MARY E
STREET ADDRESS 2701 CREEKS EDGE LANE
CITY-ST-ZIP NAVARRE FL
TITLE VP ☒ DELETE
NAME BENCE, PHYLLIS R
STREET ADDRESS 8489 NAVARRE PKWY
CITY-ST-ZIP NAVARRE FL
TITLE VP ☐ DELETE
NAME ALFRED J. BENDER III
STREET ADDRESS 300 COROBA ST.
CITY-ST-ZIP GULF BREEZE, FL 32561
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

14. I do 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, or on an attachment with an address.

SIGNATURE *MARY E. Rebholz* DATE 4/15/97 004 939 3580

CR2E034 (9/96)