

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).

FILED

Sep 23 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # G53682 (2)

1. Corporation Name
 HMS MORTGAGE COMPANY, INC.



Principal Place of Business

400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325
 US

Mailing Address

400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

08/05/1983

4. FEI Number

59-2349385

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

9. Name and Address of Current Registered Agent

CHILDRESS, KAREN
 400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325

10. Name and Address of New Registered Agent

81 Name Cynthia Starrett
 82 Street Address (P.O. Box Number is Not Acceptable) 400 Sawgrass Corporate Pkwy
 83
 84 City Sunrise FL 85 Zip Code 33325

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 *Cynthia Starrett* Treasurer

8/31/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TVD MORRIS, C G
 400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325

DV BUCCELLATO, CARL
 400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325

D CHILDRESS, KAREN
 400 SAWGRASS CORPORATE PWY
 SUNRISE FL 33325

DELETED

DELETED

DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

P Alan Pyles
 400 Sawgrass Corporate Pkwy
 Sunrsie, FL 33325

V Howard Wolk
 400 Sawgrass Corporate Pkwy
 Sunrise, FL 33325

T Cynthia Starrett
 400 Sawgrass Corporate Pkwy
 Sunrise, FL 33325

S Nathan Wolk
 400 Sawgrass Corporate Pkwy
 Sunrise, FL 33325

DELETED

DELETED

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: *Cynthia Starrett* Cynthia Starrett

8/31/98 (954) 845-9100

CR2E034 (5/98)