FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # **H17518** **(2)**

1. Corporation Name
COAST MORTGAGE COMPANY

Principal Place of Business
% SONDRA ROCK
3127 W.HALLANDALE BCH.BLVD..STE.101
HALLANDALE FL 33009

Mailing Address
% SONDRA ROCK
3127 W.HALLANDALE BCH.BLVD..STE.101
HALLANDALE FL 33009

3. Date Incorporated or Qualified: 08/21/1984
3a. Date of Last Report: 01/26/1994

2. Principal Place of Business
21 3127 W. Hallandale Bch. Blvd
Suite, Apt. #, etc.
22 Suite 102
City & State
23 Hallandale, FL
Zip 24 33009
Country 25 U.S.A

2a. Mailing Address
26 3127 W. Hallandale Bch. Blvd
Suite, Apt. #, etc.
27 Suite 102
City & State
28 Hallandale, FL
Zip 29 33009
Country 30 U.S.A

4. FEI Number 59-2449547 — 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 has liability for intangibles under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
ROCK, SONDRA
3127 W. HALLANDALE BCH BLVD.
SUITE 101
HALLANDALE FL 33009

10. Name and Address of New Registered Agent
81 Name: Sondra Rock
82 Street Address (P.O. Box Number is Not Acceptable): 3127 W. Hallandale Beach Blvd.
83 Suite 102
84 City: Hallandale, FL 85 Zip Code: 33009

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 Sondra Rock President — 4-22-95
Sondra Rock
(Signature, typed or printed name of Registered Agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ROCK, SONDRA
STREET ADDRESS	4825 WASHINGTON ST
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V.	☐ Change ☑ Addition
1.2 NAME	Paul P. Bettan	
1.3 STREET ADDRESS	3127 W. Hallandale Beach Blvd. Ste.102	
1.4 CITY-ST-ZIP	Hallandale, FL. 33009	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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: Sondra Rock — 4-22-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Digital Check #
Sondra Rock

0077770 CP