FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1998

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

FILED
Jul 08 1998 8:00am
Secretary of State

DOCUMENT # H30330 (5)

1. Corporation Name
PAFFORD ACCOUNTING & MORTGAGE SERVICES, INC.

[redacted]

Principal Place of Business	Mailing Address
~~308 TEQUESTA DRIVE~~ ~~SUITE 7~~ ~~TEQUESTA FL 33469~~	308 TEQUESTA DRIVE SUITE 7 TEQUESTA FL 33469

3. Date Incorporated or Qualified: 11/19/1984
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2473783 (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
7. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 311 XANADU PL	26 311 XANADU PL
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: JUPITER, FL	28 City & State: JUPITER, FL 33477
24 Zip: 33477 25 Country: PALM BEACH	29 Zip: 33477 30 Country: PALM BEACH

8. Name and Address of Current Registered Agent

PAFFORD, JOANNE
37 CEDAR HILL LANE
TEQUESTA FL 33469

10. Name and Address of New Registered Agent

81 Name: JOANNE PAFFORD
82 Street Address (P.O. Box Number Is Not Acceptable)
83 311 XANADU PLACE
84 City: JUPITER FL 85 Zip Code: 33477

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: Joanne Pafford Joanne Pafford 3-4-98 3-4-98
Signature of new registered agent and title if applicable NOTE: Registered agent signature required when reinstating DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	PAFFORD, JOANNE	
STREET ADDRESS	~~37 CEDAR HILL LANE~~ 311 XANADU PL	
CITY-ST-ZIP	~~TEQUESTA FL~~ JUPITER, FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
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STREET ADDRESS		
CITY-ST-ZIP		
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	700002582951	☐ Change ☐ Addition
6.2 NAME	-07/08/98--01051--019	
6.3 STREET ADDRESS	***150.00	
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 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: Joanne Pafford JOANNE PAFFORD 3-4-98 407 747-1176
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)