SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -8 AM 4:18

DOCUMENT # H33122 (3)

1. Corporation Name
STELLAR MORTGAGE, INC.

Principal Place of Business	Mailing Address
218 US HWY ONE STE 301 TEQUESTA FL 33469	12403 184TH COURT NORTH JUPITER FL 33478

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/06/1984
3a. Date of Last Report: 10/05/1994

2. Principal Place of Business	2a. Mailing Address
21 12495 148TH ROAD N	26 12495 148th ROAD N
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 PALM BEACH GARDENS, FL	City & State 28 PALM BEACH GARDENS, FL
Zip / Country 24 33418 / 25 PB	Zip / Country 29 33418 / 30 PB

4. FEI Number: 59-2482123 ☐ 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 intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

ELLIOTT, JENNIFER LEE
12403 184TH COURT N.
JUPITER FL 33478

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 12495 148TH ROAD N
83
84 City: PALM BEACH GARDENS FL 85 Zip Code: 33418

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: Jennifer Lee Elliott — July 31, 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSB	1.1 TITLE	ADDRESS	☒ Change ☐ Addition
NAME	ELLIOTT, JENNIFER LEE	1.2 NAME		
STREET ADDRESS	12403 184TH CT., N.	1.3 STREET ADDRESS	12495 148 TH ROAD N	
CITY-ST-ZIP	JUPITER FL	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	
TITLE		2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (3/95)

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)(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: Jennifer Lee Elliott — JENNIFER LEE ELLIOTT — July 31, 1995 — 407 625 0025
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0096348 CR