

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 22 1996 8:00 am
Secretary of State

DOCUMENT # J20089 (5)

1. Corporation Name

MONEY SOURCE ONE, MORTGAGE CORP.



Principal Place of Business

Mailing Address

MONEY SOURCE ONE MTG CORP
11036 SPRINGHILL DR
SPRING HILL FL 34608
US

MONEY SOURCE ONE MTG CORP
11036 SPRING HILL DR
SPRING HILL FL 34608
US

3. Date Incorporated or Qualified

06/17/1986

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 11034 Spring Hill Dr.

Suite, Apt. #, etc.

22

City & State

23 Spring Hill, FL

Zip

24 34608

Country

25 USA

2a. Mailing Address

26 11034 Spring Hill Dr.

Suite, Apt. #, etc.

27

City & State

28 Spring Hill, FL

Zip

29 34608

Country

30 USA

4. FEI Number

59-2692776

Applied For

Not Applicable

5. Certificate of Status Desired

XXX

\$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

DEMARIA, JAMES W.
15641 DONZI DRIVE
HUDSON FL 34667

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent (if applicable)

(NOTE: Registered Agent Signature required when name changed)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PSD
DEMARIA, JAMES W.
STREET ADDRESS
15641 DONZI DRIVE
CITY-ST-ZIP
HUDSON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96

Date

352-686-2305

City/State Phone #

CR2E034 (12/95)