

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J68970 (9)

1. Corporation Name
MORTGAGE LENDING SEMINARS, INC.

Principal Place of Business
425 W HOLLYWOOD BLVD
SUITE D
MARY ESTHER FL 32569

Mailing Address
POST OFFICE BOX 1034
FT. WALTON BEACH FL 32549-1034



2. Principal Place of Business
21 921 DENTON BLVD.
Suite, Apt. #, etc.
22 * 205
City & State
23 Ft. Walton Bch, Fl.
Zip
24 32547 Country
25 OKA1005A

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29 Country
30

3. Date Incorporated or Qualified 04/21/1987
3a. Date of Last Report 02/16/1996
4. FET Number 59-2868552 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

CLARK, EARL J
200 THOMAS CT., NW
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

81 Name 921 DENTON BLVD. - #205
82 Street Address (P.O. Box Number is Not Acceptable) EARL J. CLARK
83
84 City Ft. Walton Bch, FL 85 Zip Code 32547

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 *Earl J. Clark* EARL J. CLARK President APRIL 28, 1997
Signature, typed or printed name of registered agent and local applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PSTD	CLARK, EARL J	425 W HOLLYWOOD BLVD SUITE D	MARY ESTHER FL 32569	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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, changed, or changed with an address.

SIGNATURE: *Earl J. Clark* EARL J. CLARK April 28 1997 243-1994
(904)

CR2E034 (9/96)