

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

15 MAY - 1995 9:15

DOCUMENT # **K07157 (6)**
COAST TO COAST MORTGAGE SERVICES OF FLORIDA, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| 1. Principal Office Address % JACK WM. WINDT 2389 RINGLING BOULEVARD SUITE A SARASOTA FL 34237 | Main Address % JACK WM. WINDT 1751 MOUND ST 106 SARASOTA FL 34236 US |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|

| | |
|----------------------------------------------------------------|---------------------------|
| 2. Principal Place of Business 21 1751 Mound St #106 | 2a. Mailing Address 26 |
| 22 State Apt. # etc. | 27 State Apt. # etc. |
| 23 City & State SARASOTA | 28 City & State |
| 24 Zip FL | 25 Country USA |
| 29 34236 | 30 |

| | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3. Date incorporated or qualified 12/16/1987 | 3a. Date of last report 04/25/1994 |
| 4. FIC Number 65-0015451 | Applied For Not Applied For |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has voluntarily or involuntarily liquidated or dissolved in the State of Florida <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent
**WINDT, JACK WM.
2389 RINGLING BOULEVARD SUITE A
SARASOTA FL 34237**

10. Name and Address of New Registered Agent

| |
|-----------------------------------------------------------------------------------------|
| 81 Name K. JAMES ANDREWS |
| 82 Street Address (P.O. Box Number is Not Applicable) 1911 ROLLING GREEN CIR. |
| 83 |
| 84 City SARASOTA |
| 85 State FL |
| 86 Zip Code 34240 |

11. Pursuant to the provisions of Sections 607.0602 and 607.1401, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the registered agent or office 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 607.0602, Florida Statutes.

SIGNATURE *K. James Andrews* **4-30-95**

12. OFFICERS AND DIRECTORS

| | | | |
|---------|----------------------|--------------------|-------------|
| OFFICER | NAME | STREET ADDRESS | CITY |
| PTS | ANDREWS, K. JAMES JR | 1751 MOUND ST S106 | SARASOTA FL |
| VP | ANDREWS, CINDY T | 1751 MOUND ST S106 | SARASOTA FL |
| | | | |
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13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

| | | | | | |
|---------|------|----------------|------|-------------------------------------|--------------------------|
| OFFICER | NAME | STREET ADDRESS | CITY | Change | Addition |
| | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

NO VICE PRESIDENT

14. I, the undersigned, certify that the information supplied with this filing is voluntarily prepared and filed and equally for the purposes stated in sections 607.0602 and 607.1401, Florida Statutes. I further certify that the information included in this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if the person affixing that signature were a duly authorized officer or director of the corporation. If the name of the officer or director is not included in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 13 of this report, or on an attached form with an address:

SIGNATURE: *K. James Andrews* **4-30-95** **813 3657340**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
K. JAMES ANDREWS