FILED

Mar 01, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

•	1999 DIVISION OF CORPORATIONS			03-01-1999 90154 001 ***150.00
DOCUMENT # K87656				05 01 1999 3013 1 001 1 130.00
1. Corporation Name				
COUNTY MORTGAGE, INC.				
				i ibribili dal irik irbic akan akib bili dibi dibi ribi bibi bibi bibi bibi bib
Principal Place	of Business	Mailing Address		(188(81) 88) 1811) 18818 SUBL BUIL AND
12571 SPRING HILL DR 12571 SPRING HILL DR				
SPRING HILL FL 34609 SPRING HILLS FL 34609 US US				DO NOT WRITE IN THIS SPACE
03		00		3. Date incorporated or Qualifed
				05/11/1989
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-2949495 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23	2	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 30	o]	Personal Property Tax.
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent
DURM, DONALD D SR				Daniel J. Comeau
12571 SPRING HILL DR				Address (P.O. Box Number is Not Acceptable)
SPRING HILL FL 34609				12571 Spring Hill Dr.
0711110 71122 7 2 0 0 0 0 0				
84 City Spri				Spring Hill FL 85 Zip Code 34609
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	Munt 3 Chi	- DANIEC J	egistered Agent signature re	President 1-29-99
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	⊠ DELETE	1.1 TITLE	Dresident Michange Maddition
NAME	DURM, DONALD D. SR.		1.2 NAME	DANIEL J. Comeau
STREET ADDRESS	12571 SPRING HILL DR		1.3 STREET ADDRESS	12571 Spring Hill Dr.
CITY-ST-ZIP	SPRING HILL FL		1.4 CITY-ST-ZIP	Spring Hill, FL 34609/
TITLE	VSD	⋈ DELETE	2.1 TITLE	SECRATARY Change Addition
NAME	DURM, BETTY R.		2.2 NAME	DANIEL J. COMEAU
STREET ADDRESS	12571 SPRING HILL DR		2.3 STREET ADDRESS	12571 SPRING HILL DR.
CITY-ST-ZIP	SPRING HILL FL	₩ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	SPRING HILL, F1. 34609 Tresurere _ Change Addition
TITLE	D Durm, Donald D Sr	M DECE IC	3.2 NAME	DAWIEL J. COMEAU
NAME STREET ADDRESS	12571 SPRING HILL DR		33 STREET ADDRESS	12571 SPRING HILL DR.
CITY-ST-ZIP	SPRING HILL FL		3.4 CITY-ST-ZIP	DAWIEL J. COMEAU 12571 SPRING HILL DR. SPRING HILL, Fl. 34609
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		4,4 CITY-ST-ZIP	
TITLE		☐ DELETE	, 5,1 τιπ.Ε	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		□ occess	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
TITLE		☐ DELETE	6.1 HILE 6.2 NAME	[7.Citatiàe Modition

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

D ANIEC