FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (2)AMERIMORTGAGE CORPORATION Mailing Address Principal Place of Business 1300 S ROOSEVELT 1300 \$ ROOSEVELT KEY WEST FL 33040 KEY WEST FL 33040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1989 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 26 65-0145256 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zıp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 26 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **R1** MILLER, DOUGLAS H. 1300 S ROOSEVELT Street Address (P.O. Box Number is Not Acceptable) KEY WEST FL 33040 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change TITLE NAME MILLER, DOUGLAS H. 1.2 NAME 1300 S. ROOSEVELT BLVD. STREET ADDRESS 1.3 STREET ADDRESS KEY WEST FL CITY-S1-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 21 TITLE CORCORAN, REGINA E. NAME 22 NAME 1300 S. ROOSEVELT BLVD. 2.3 STREET ADDRESS STREET ADDRESS KEY WEST FL CITY-ST-ZIP 2. 4 C/TY - ST - Z/P DELETE Change Addition TITLE 3 1 T(T) F 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 congoration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 it enarged, or on an attachment in an address.

REGINA E CORCORAN VICE-PRESIDENT 4/29/98 305/294.

SIGNATURE:

5.4 CITY-ST-ZIP

63 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ Change

☐ Addition

DELETE

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS