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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L19113

714 7386

FLORIDA FED SERVICING, INC.

Mailing Address

FILED Feb 26 1998 8:00am Secretary of State



1201 W. PEACHTREE ST., NE STE, 1800 ATLANTA GA 30309-3415 US		1201 W. PEACHTREE ST., NE STE, 1800 ATLANTA GA 30309-3415 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/28/1989			
	icipal Place of Business . 2a. Mailing Address				4. FEI Number	1	olied For	
21 1910 Pacific Ave 26 1910 Pacific			Ave		59-2979556		Applicable	
Suite Apt 16th		Suite, Apt. # etc. 16th F1			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State Da 11	as, TX 28 Dallas, TX				Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to		
Zip 7520:	Country US	Zip 75201 3r	Country		8. This corporation owes or has paid the curre	· -	. •	
24 /520	9. Name and Address of Current	120	US	i	Personal Property Tax due June 30.		No	
	_	vaðisteleg viðetir	81	Name	10. Hame and Address of New Hegistered A	Jenic		
C T CORPORATION SYSTEM				VI TAGING				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			82 Street A		Address (P.O. Box Number is Not Acceptable)			
			83	83				
			"					
			84	City	FL	85 Zip C		
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE DATE								
12.					ADDITIONS/CHANGES TO OFFICERS AND D	_		
TITLE	DP DELETE		1.7 11100			Change	Addition 3	
NAME				JUST, RANDY				
STREET ADDRESS	1211 111 121 1111 1121 1121			13 STREET ADDRESS 1910 Pacific Ave, 16th F1			្រ្តី	
CITY-ST-ZIP	ATLANTA GA		7.4 01(1-01-21)		Dallas, TX 75201		<u></u> }	
TITLE	DVPS	DELETE	2.1 TITLE		_	Change	☐ Addition C	
NAME	,			22 NAME BELL, DANIEL M.				
STREET ADDRESS	,			2.3 STREET ADDRESS 1910 Pacific Ave., 16th F1				
CITY-ST-ZIP	ATLANTA GA		2. 4 CITY-5	ST-ZIP	Dallas, TX 75201	7 5		
TITLE	DVPS	DELETE.	3.1 TITLE			Change	Addition	
NAME	FARRELL, CHARLES P.	ATE 4000	3.2 NAME		CAMPAGNA, FRANK			
STREET ADDRESS	1201 W. PEACHTREE ST., NE,	91E. 1800	3.3 STREET	l.	1910 Pacific Ave., 16th Fl			
CITY-ST-ZIP	ATLANTA GA DST	DELETE	3.4. CITY - 8	ST-ZIP	Dallas, TX 75201	Chacas	Addition	
TITLE		XT DEFFIE	4.1 TITLE	ľ	DST k	∐ Change	Addition	
NAME	ROSSETTI, JOHN P	CTE 4000	4. 2 NAME	******	SCHUG, JOHN			
STREET ADDRESS	1201 W. PEACHTREE ST., NE, ATLANTA GA	01E. 16UU	4.3 STREET		1910 Pacific Ave, 16th F1			
CITY-ST-ZIP TITLE	AILANIA GA	DELETE	4.4 CITY-S 5.1 TITLE	I - ZIP	Dallas, TX 75201	Change	Addition	
NAME I			5.1 TILLE 5.2 NAME	j		⊐ oren y c		
				1000000				
STREET ADDRESS			5.3 STREET					
CITY-\$T-ZIP		DELETE	5.4 CITY - S 6.1 TITLE	i-ZIP		Change	Addition	
NAME		- Acrest	6.2 NAME		_	01101190		
STREET ADDRESS			6.3 STREET	4DDRF99				
11. 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 jupplemental annual report is true and eccurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corpyration 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 charged for on an attacement with an address.								

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 upplemental 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 in or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or on an attachment with an address.