FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **M01942** **(5)**

1. Corporation Name

BERKLEY MORTGAGE CORP.

Principal Place of Business	Mailing Address
3005 GREENE ST HOLLYWOOD FL 33020	3005 GREENE ST HOLLYWOOD FL 33020

3. Date Incorporated or Qualified: **06/19/1984**
3a. Date of Last Report: **01/26/1995**

4. FEI Number: **59-2443778** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 3009 Greene ST	26 3009 Greene St
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Hollywood FL	28 City & State: Hollywood FL
24 Zip: 33020 25 Country: USA	29 Zip: 33020 30 Country: USA

9. Name and Address of Current Registered Agent

WELT, WAREN
3005 GREENE ST
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name: Warren Welt
82 Street Address (P.O. Box Number is Not Acceptable): 3009 Greene ST
83
84 City: Hollywood FL 85 Zip Code: 33020

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: _____ DATE: _____
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BELOFF, JONATHAN D.		1.2 NAME		
STREET ADDRESS	701 BRICKELL AVE SUITE 1900		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33131		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	WARREN, WELT		2.2 NAME		
STREET ADDRESS	3005 GREENE ST		2.3 STREET ADDRESS	3009 Greene ST	
CITY-ST-ZIP	HOLLYWOOD FL 33020		2.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	LOVE, STEVEN B		3.2 NAME		
STREET ADDRESS	1986 NE 148TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33181		3.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	CREEDY, PAUL		4.2 NAME	3009 Greene ST	
STREET ADDRESS	3005 GREENE ST		4.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33020		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RUSSELL, TERRENCE		5.2 NAME		
STREET ADDRESS	200 E BROWARD BLVD PO BOX 1900		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33302		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: _____ 4/17/96 954 979-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)