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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # M0929

(6)

## FILED Jan 26 1998 8:00am Secretary of State

Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Sc. Certificate of Status Desired   Se. T5 Acctitional Fee Required Fee Required Pee Required	SS SUNRISE AVE   PALM BEACH FL 33490   PAL	As SURNISE AVE PALM BEACH FL 33460  28 SURNISE AVE PALM BEACH FL 33460  29 Sulle, Apr. II, etc. 25 Sulle, Apr. II, etc. 25 Sulle, Apr. II, etc. 27 Sulle, Apr. III, etc. 27	OXFORD MORTGAGE COMPANY					
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PALM BEACH FL 33480  PALM BEAC	PALM BEACH FL 33480  PALM BEACH FL 33480  PALM BEACH FL 33480  PALM BEACH FL 33480  DO NOT WRITE IN THIS SPACE 3. Date Incorporated Organized 12/2/1984  2. Principal Place of Business 2. Admilling Address 2. Principal Place of Business 2. Admilling Address 2. Suite, Apt. 4, etc. 2. Suite, Apt. 4,	PALM BRACH FL 33480  PALM BRACH FL 33480  PALM Seach FL 33480  PALM Seac	}		-			
2. Principal Place of Business   2a. Mailing Address   3. Date Incorporated or Qualified   12/26/1984   21   25   36   3. Date Incorporated or Qualified   12/26/1984   3. Date Incorporated   3. Date Incorporat	2. Principal Place of Business	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  12/26/1984  26						
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   Sp2474/961   Nort Applicable   Surie, Apt. #, etc.   S. Certificate of Status Desired   S8.75 Additional property face of Status Desired Agent   S8.75 Additional property face of Status Desired Agent   S8.75 Additional property face of Status Desired Agent   S8.75 Additional property face of S8.75 Additiona	12/26/1984	12//6/1984	TACM DEAGL	12 33400	FALM DEAUT FL 33460		DO NOT WRITE IN TH	IIS SPACE
A. FEI Number   Applied For Square   Applied For	21	Applied For Sp2474961   Applied For Sp2474961   Not Applied For Sp2474961   Not Applied For Sp2474961   Not Applied For Sp2474961   Sp. 24 Applied For Trust Fund Contribution For Sp. 24 Applied For Trust Fund Contribution   Sp. 25 Applied For Trust Fund Contribution   Sp. 24 Applied For Trust Fund Contribution For Trust					3. Date incorporated or Qualified	
Suite, Apt. #, etc.   Since   Section of Status Desired   Section of Secti	Suite, Apt. #, etc.	Sulte, Apt. #, etc.   Soute, Apt. #, etc.					12/26/1984	
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City & State  Ci	City & State  Ci	277   S. Certificate of Status Desired   S. Certificate of Status Desired   S. Control   S. S. Own May Be Added to Fees   S. Own May Be Added to Country year Intangible   S. S. Own May Be Added to Country year Intangible					59-2474961	
City & State	City & State	Stock   State   Stock   Stoc		#, elc.	<u> </u>		5. Certificate of Status Desired	
Zip	Zip Country 28	Country Zip Country Sign Sign Sign Sign Sign Sign Sign Sign		2		•••	*	
Zip Country Zip Country	Zip	Country 25	_ `	7	— ·			
29 30 Personal Property Tax due June 30. Personal P	28   28   30   Personal Property Tax due June 30   Personal Prop	25   29   30   Personal Property Tax due June 30.   Effect   No   Normal and Address of Current Registered Agent   10. Name and Address of New Registered Agent   Normal Address of Normal		Country		Country		
9. Name and Address of Current Registered Agent  ROGERS, R. JULIAN 235 SUNRISE AVE. PALM BEACH FL 33490  11. Pursuant to the provisions of Sections 607:0502 and 807:1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, I am familiar with, and accept the obligations of, Section 607:0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  ORGERS, R. JULIAN  12. NAME  ROGERS, R. JULIAN  12. NAME  ROGERS, R. JULIAN  12. NAME  ROGERS, R. JULIAN  13. SIRECT ADDRESS  CITY-ST-ZIP  PALM BEACH FL  14. CITY-ST-ZIP  PALM BEACH FL  13. SIRECT ADDRESS  GITY-ST-ZIP  PALM BEACH FL  14. CITY-ST-ZIP  15. DELETE  21. TITLE  21. TITLE  31. TITLE  32. STREET ADDRESS  GITY-ST-ZIP  Addition  AMME  ALLISON, ESTALINE  32. SIRRET ADDRESS  34. CITY-ST-ZIP  Addition  14. CITY-ST-ZIP  Addition  Addition  AMME  ALLISON, ESTALINE  32. SIRRET ADDRESS  34. CITY-ST-ZIP  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  A	9. Name and Address of Current Registered Agent  ROGERS, R. JULIAN 235 SUNRISE AVE. PALM BEACH FL 33480  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 change was authorized by the corporation's board of directors. I hereby accept the appointment for the provisions of Sections 607:0502 and 607:1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment for the provisions of section 607:0502, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICIENS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. GITY-ST-2IP  PALM BEACH FL  15. THE  ST  ALLISON, ESTALINE  9028 COLONY STREET  15. DELETE  15. THE  15. T	10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Name 13. Name 14. Name 15. Name 15. Name 15. Name 16. Name 16. Name 17. Name 18. Name 19.	<del></del>	<u> </u>	<del></del>			
ROGERS, R JULIAN 235 SUNRISE AVE. PALM BEACH FL 33480  10	ROGERS, R JULIAN 235 SUNRISE AVE. PALM BEACH FL 33480  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 change was authorized by the corporation's board of directors. I hereby accept the appointme agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent in familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of change of change of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose of change was authorized by the corporation's board of directors. I hereby accept the appointme agent and the limit purpose and the limit applicable.    12.	BERS, R JULIAN SUNRISE AVE. A BEACH FL 33480  82 Street Address (P.O. Box Number is Not Acceptable)  83   B4 City	[24]			301		
235 SUNRISE AVE. PALM BEACH FL 33480  82   Street Address (P.O. Box Number is Not Acceptable)  83   84   City   FL   85   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 agent, an familiar with, and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE  Signature, hybert or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD   DELETE 11 TITLE   Change   Addition Additi	### PALM BEACH FL 33480  ### City   FL   85   ### C	BLINRISE AVE.  ### DEACH FL 33480  ### City	PC			81 Name		
PALM BEACH FL 33480  83  84	PALM BEACH FL 33480  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 change was authorized by the corporation's board of directors. I hereby accept the appointment of the provisions of Sections 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of the appointment of the corporation's board of directors. I hereby accept the app	A BEACH FL 33480  B3  B4 City  FL 85 Zip Code  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 spent, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  (HOTE Registered Agent Spharter required when reinstaling)  OFFICERS AND DIRECTORS  DELETE  11 TITLE  OFFICERS AND DIRECTORS IN 12  PD  OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PAMME 13 STREET ADDRESS  PALM BEACH FL  14 CITY-51-ZIP  15 TITLE  OCHange Addition  ALLISON, ESTALINE  9028 COLONY STREET  OBLETE  15 TITLE  16 Change Addition  16 JAMME 18 JAM				99 81 14 11	(3.0.5)	
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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 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  DELETE  1.1 TITLE  PD  Addition  NAME  ROGERS, R. JULIAN  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  PALM BEACH FL  ALLISON, ESTALINE  STREET ADDRESS  CITY-ST-ZIP  HOBE FL  DELETE  2.4 CITY-ST-ZIP  DELETE  3.1 TITLE  DELETE  3.1 TITLE  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  ACCEPTAGE  ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  ACCEPTAGE  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  ACCEPTAGE  ADDRESS  CITY-ST-ZIP  TITLE  ACCEPTAGE  ACCE	The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature   Signat	The provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purches of changing its registered justered 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 familiar with, and accept the obligations of, Section 607,0508, Florida Statutes.    Post	173	SIII BEACH I E 00400		83		
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 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  DELETE  1.1 TITLE  PD  Addition  NAME  ROGERS, R. JULIAN  1.2 NAME  STREET ADDRESS  CITY-ST-ZIP  PALM BEACH FL  ALLISON, ESTALINE  STREET ADDRESS  CITY-ST-ZIP  HOBE FL  DELETE  2.4 CITY-ST-ZIP  DELETE  3.1 TITLE  DELETE  3.1 TITLE  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  ADDRESS  CITY-ST-ZIP  ACCEPTAGE  ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  ACCEPTAGE  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  ACCEPTAGE  ADDRESS  CITY-ST-ZIP  TITLE  ACCEPTAGE  ACCE	The provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature   Signat	The provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purches of changing its registered justered 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 familiar with, and accept the obligations of, Section 607,0508, Florida Statutes.    Post						
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE	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 change 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 appointme agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE	The provisions of Sections 607 CSO2 and 607.1508, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered gent 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.    OFFICERS AND DIRECTORS   13.				84 City	F	85 Zip Code
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)	Signature   Sign	Change   Addition   Change   Addition   Ad	11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named corp		
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)	Signature   Signature   Syped or primed name of registered agent and life if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE	Change   Addition   Activity   Addition	office or re	egistered agent, or both, in the State m familiar with, and accept the oblin	e of Florida. Such change was a nations of Section 607 0505. Flo	uthorized by the corporati	on's board of directors. I hereby accept the a	appointment as registered
Signature, typed or primed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)   DATE	Signature typed or printed name of registrerial agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE	13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Transma Way and accept the cong	gallons of, Section 607.0505, 110	nda diatutes.		
TITLE	TITLE	PD		Signature, typed or printed name of registered ag	gent and title if applicable. (NOTE	. Registered Agent signature require	ed when reinstating) DATS	<u> </u>
NAME   ROGERS, R. JULIAN   1.2 NAME   1.3 STREET ADDRESS   235 SUNRISE AVE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   PALM BEACH FL   1.4 CITY-ST-ZIP	ROGERS, R. JULIAN   1.2 MAME   235 SUNRISE AVE   1.3 STREET ADDRESS   CITY-ST-ZIP   PALM BEACH FL   DELETE   2.1 TITLE   Chamber   Cha	1.2 MAME		OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
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DELETE   1.4 CITY-ST-ZIP	DELETE   ST	PALM BEACH FL				1.2 NAME		
TITLE         ST         DELETE         2.1 TITLE         Addition           NAME         ALLISON, ESTALINE         2.2 NAME           STREET ADDRESS         9028 COLONY STREET         2.3 STREET ADDRESS           CITY-ST-ZIP         2.4 CITY-ST-ZIP           TITLE         3.1 TITLE         Change         Addition           NAME         3.2 NAME           STREET ADDRESS         3.3 STREET ADDRESS         CITY-ST-ZIP           TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME         4.2 NAME           STREET ADDRESS         4.3 STREET ADDRESS         4.4 CITY-ST-ZIP	TITLE ST	DELETE	1			1.3 STREET ADDRESS		
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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, if on an attachment with an address.

SIGNATURE:

1/4/25

361