FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT

4000
1996



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FORECLOSURE CLEARINGHOUSE, INC.

Principal Place of Business

Mailing Address

1137 U.S. 98 SOUTH SHITE 200



LAKELAND	FL 33801	LAKELAND FL 3380			
				3. Date Incorporated or Qualified 06/13/1988	3a. Date of Last Report 05/01/1995
	S.Florida Ave.		Iorida Ave.	4. FEI Number 59-2911795	Applied For Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State La Kel		City & State 28 Lakeland	, FL	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
24 ²³ 3386	25 PO K 9. Name and Address of Currer	^{Zip} 29 3 3 8 0 3	30 POK		□No
1703 S	. WILLIAM C. KINNER STREET AND FL 33801	. Tragassion Agent	81 Name 82 Street A 83 84 City	10. Name and Address of New R William C. Berr Odress (P.O. Box Number is Not Acceptable I Brandon Roo	111
familiar with	i, and accept the obligations of Secti	ion 607.0505, Florida Statute	zed by the corporation's b is.	Pland poration submits this statement for the pur loard of directors. Thereby accept the appora-	ointment as registered agent. I am
12.	Ignature, typed or printed name of registered agoct OFFICERS ANI		OTE Registered Agent signature req		DATE
TOLE	PD	DELETE	13. 1 1 TITLE	ADDITIONS/CHANGES TO OFFI	
NAME	BERRY, WILLIAM C.	beer te			Change 🔲 Addition
STREET ADDRESS	6001 SWEETGUM RUN		12 NAME	Berry, William Co 316 Brandon Road	
1	BARTOW FL		1.3 STREET ADDRESS	3016 Brundon Kalo	\ <u>~</u>
CITY ST-ZIP	VSD	DELETE	1.4 CITY-ST-ZIP	Lakeland, FL 3380	23
NAME	BERRY, PATRICIA A	□ btteit	2 1 THLE	Policia A	Change
STREET ADDRESS	6001 SWEETGUM RUN		2 2 NAME	series ratificially	
	BARTOW FL		2 3 STREET ADDRESS 2	Berry, Patricia A. 1316/Brandon Road -akeland, FL 33803	
CITY -ST-ZIP		[7] DELETE	2 4 CITY - ST - 2IP	-akelana, F <i>L 33</i> 803	
NAME		C) beering	3 1 TITLE		Change Addition
STREET ADDRESS			3 2 NAME		
CHTY - ST - ZIP			3.3. STREET ADDRESS		
117LE		☐ DELETE	3 4 CITY - ST - ZIP 4 1 TITLE		Change Addition
NAME			4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
C-ITY - ST - Z-P			4 4 CiTY - ST - ZiP		
TITLE		DELETE	5 1 1/TLF		Change Addition
NAM			52 NAME		Onlinge Addition
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-S1-ZIF			54 CITY-ST-ZIP		
III.E		☐ DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		Ell cuerdo El adoubli.
STREET ADDRESS			6 3 STREET ADDRESS		
City-\$1-7iP			64 CITY-ST-ZIP		
	certify that the information supplied w	rith this filing is voluntarily furr	nished and does not qualify	y for the exemption stated in Section 119.0	17/3/W Florida Statutes I further

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 attack ment and address

SIGNATURE:

IINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96 941/683-6706