FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

'95 MAR 16 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N22499 (0)

1. Corporation Name

VOLUSIA CHAPTER OF THE FLORIDA ASSOCIATON OF MOR TGAGE BROKERS, INC.

Principal Place of Business	Mailing Address
1301 BEVILLE RD STE 1 DAYTONA BEACH FL 32119 US	1301 BEVILLE RD STE 1 DAYTONA BEACH FL 32119 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/15/1987
3a. Date of Last Report: 04/15/1994
4. FEI Number: 59-2892410 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

BRIDGES, LORENE
1274 PAUL RUSSELL RD
STE 1
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
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 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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	BOYCE, JOHN C	1.2 NAME	JOSEPH R. YATES III	
STREET ADDRESS	302 W NEW YORK AVE	1.3 STREET ADDRESS	1450 S. WOODLAND BLVD.	
CITY-ST-ZIP	DELAND FL	1.4 CITY-ST-ZIP	DELAND FL 32720	
TITLE	DV	2.1 TITLE	D	☒ Change ☐ Addition
NAME	YATES, JOSEPH III	2.2 NAME	MARY SPEARMAN	
STREET ADDRESS	1450 S WOODLAND BLVD	2.3 STREET ADDRESS	733 BEVILLE RD	
CITY-ST-ZIP	DELAND FL	2.4 CITY-ST-ZIP	S. DAYTONA FL 32119	
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	YOUNG, HAROLD	3.2 NAME	JOHN BOYCE	
STREET ADDRESS	1301 BEVILLE RD #1	3.3 STREET ADDRESS	884 SAXON BLVD.	
CITY-ST-ZIP	DAYTONA BCH FL	3.4 CITY-ST-ZIP	ORANGE CITY FL 32763	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph R Yates III 3-13-95 904-739-9633
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR — Date — Daytime Phone #

0000460