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 # **P07038** **(3)**

1. Corporation Name

CORINTHIAN MORTGAGE CORPORATION

Principal Place of Business	Mailing Address
10561 BARKLEY SUITE 300 OVERLAND PARK KS 66212-8840	10561 BARKLEY SUITE 300 OVERLAND PARK KS 66212-8840

3. Date Incorporated or Qualified: **08/08/1985**

3a. Date of Last Report: **01/31/1995**

2. Principal Place of Business
21 5700 Broadmoor
Suite, Apt. #, etc.
22 Suite 500
City & State
23 Mission, KS
Zip 24 66202 County 25 Johnson

2a. Mailing Address
26 5700 Broadmoor
Suite, Apt. #, etc.
27 Suite 500
City & State
28 Mission, KS
Zip 29 66202 Country 30 Johnson

4. FEI Number: **64-0713034** ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0302 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition
NAME	WOOD, EDGAR R.	12 NAME	
STREET ADDRESS	10561 BARKLEY ST. #300	13 STREET ADDRESS	5700 Broadmoor, Suite 500
CITY ST ZIP	OVERLAND PARK KS	14 CITY ST ZIP	Mission, KS 66202
TITLE	T ☐ DELETE	21 TITLE	☒ Change ☐ Addition
NAME	BOURLAND, DON R.	22 NAME	
STREET ADDRESS	10561 BARKLEY ST. #300	23 STREET ADDRESS	5700 Broadmoor, Suite 500
CITY ST ZIP	OVERLAND PARK KS	24 CITY ST ZIP	Mission, KS 66202
TITLE	S ☐ DELETE	31 TITLE	☒ Change ☐ Addition
NAME	GULINSON, MICHAEL J.	32 NAME	
STREET ADDRESS	10561 BARKLEY ST. #300	33 STREET ADDRESS	5700 Broadmoor, Suite 500
CITY ST ZIP	OVERLAND PK. KS	34 CITY ST ZIP	Mission, KS 66202
TITLE	D ☐ DELETE	41 TITLE	☒ Change ☐ Addition
NAME	WIGINTON, DANNY	42 NAME	
STREET ADDRESS	515 FILLMORE ST.	43 STREET ADDRESS	118 Jefferson Street
CITY ST ZIP	CORINTH MS	44 CITY ST ZIP	Huntsville, AL 35801
TITLE	D ☐ DELETE	51 TITLE	☒ Change ☐ Addition
NAME	FIELD, PETER, W.	52 NAME	
STREET ADDRESS	515 FILLMORE ST.	53 STREET ADDRESS	118 Jefferson Street
CITY ST ZIP	CORINTH MS	54 CITY ST ZIP	Huntsville, AL 35801
TITLE	D ☐ DELETE	61 TITLE	☒ Change ☐ Addition
NAME	WELDEN, W., EDGAR	62 NAME	
STREET ADDRESS	515 FILLMORE ST.	63 STREET ADDRESS	118 Jefferson Street
CITY ST ZIP	CORINTH MS	64 CITY ST ZIP	Huntsville, AL 35801

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added by amendment with an address.

SIGNATURE: _____ January 29, 1996 (913) 236-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER

Michael J. Gulinson, Executive Vice President/Secretary

CR2E034 (12/95)