

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P11421

(5)

1. Corporation Name

MORTGAGE SAVINGS CORP.

Principal Place of Business

6436 NW 5TH WAY
FT LAUDERDALE FL 33309
US

Mailing Address

6436 NW 5TH WAY
STE 101
FT LAUDERDALE FL 33309
US

FILED
Jul 29 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/16/1986

4. FEI Number

36-3444915

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

OPPER, RONALD, B
6436 NW 5TH WAY
SUITE 203
FT LAUDERDALE FL 33309

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	OPPER, RONALD B.	
STREET ADDRESS	6436 NW 5TH WAY	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ISAACSON, GAIL	
STREET ADDRESS	6436 NW 5TH WAY	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	WILENS, JEFFREY	
STREET ADDRESS	6436 NW 5TH WAY	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

800002604898
-07/31/98--01103--014
***150.00

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, or on an attachment with an address.

SIGNATURE:

[Signature]

7/14/98

9/14/98

CR2E034 (5/98)

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BANK ASSOCIATES
6436 N.W. 5th Way
Ft. Lauderdale, FL 33309

July 21, 1998

Annual Reports Filings
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Re: JTH Inc. of Illinois
Doc # P 25049
FEI # 36-3107260

Re: Mortgage Savings Corp.
Doc # P 11421
FEI # 36-3444915

Re: H.J. Isaacson, Inc.
Doc # P 25048
FEI # 36-3316952

Dear Sir:

Please be advised that the original Annual Reports for the above listed corporations were never received. Although the address is correct on these second notices, we were previously located in Deerfield, FL and possibly the originals may have been sent there

In conversation with Christy W. from the telephone number listed on the report, she advised me to enclose a check for \$150.00 for each corporation, and write a letter of explanation to the correspondence address on the report and it would be reviewed.

I have enclosed the checks and reports and would appreciate your contacting me if there is anything further we may need to do. Thank you

Sincerely,



Sally L. Dunham
Administrative Accountant

Sld/jb