FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

AND FILED

95 MAY -1 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P28159** **(2)**

1. Corporate Name
CORRESPONDENT SERVICES CORPORATION

Principal Place of Business
% TAX DEPT. 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087

Mailing Address
% TAX DEPT. 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/14/1990**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **22-2999831** ☐ 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 607.0502 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	TITLE	☐ Change ☐ Addition
NAME	BASSO, ROBERT	NAME	
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	S	TITLE	☐ Change ☐ Addition
NAME	HAUGHEY, DOROTHY F.	NAME	
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	T	TITLE	☐ Change ☐ Addition
NAME	SMITH, PIERCE	NAME	
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	MCGILVRAY, JAMES	NAME	
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	BENMOSCHE, ROBERT	NAME	
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	
TITLE	V	TITLE	Asst. Treasurer ☒ Change ☐ Addition
NAME	PEZZULICH, PETER	NAME	DeVito, Louis
STREET ADDRESS	1000 HARBOR BLVD	STREET ADDRESS	1000 Harbor Blvd.
CITY-ST-ZIP	WEEHAWKEN NJ	CITY-ST-ZIP	Weehawken, NJ

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 on an attachment with an address.

SIGNATURE: Louis DeVito
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0000831 CP