

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

700001836197
-05/23/96--01014--016
***200.00

DOCUMENT # P28159

1. Corporation Name

Correspondent Service Corporation

Principal Place of Business

Mailing Address

%Tax Dept. 9th Floor %Tax Dept. 9th Floor

1000 Harbor Blvd

1000 Harbor Blvd

Weehawken, NJ 07087

Weehawken, NJ 07087

3. Date Incorporated or Qualified
2/14/90

3a. Date of Last Report
5/1/94

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

22-2999831

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

\$8.75 Additional

Fee Required

City & State

23

City & State

28

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

Zip

24

Country

25

Zip

29

Country

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT Corporation System
1220 S. Pine Island Road
Plantation, FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President ☐ DELETE
NAME Robert S. Basso
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP Weehawken, NJ 07087

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V-President ☐ DELETE
NAME Howard Bruck
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP Weehawken, J 07087

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE Secretary ☐ DELETE
NAME Dorothy F. Haughey
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP Weehawken, NJ 07087

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE Asst.Treasurer ☐ DELETE
NAME Louis J. DeVico
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP Weehawken, NJ 07087

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE Treasurer ☐ DELETE
NAME Pierce R. Smith
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP Weehawken, NJ 07087

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V-President ☐ DELETE
NAME June Hans
STREET ADDRESS 1000 Harbor Blvd
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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)(k), 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 J. DeVico

4/26/96

201-902-4323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Daytime Phone #