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).

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

CITIZENS MORTGAGE, INC.

FILED Aug 05 1998 8:00am Secretary of State

									ai iiii			
Principal Place of Business Mailing Address)				
1550 EAST 79TH ST. SUITE 535 BLOOMINGTON MN 55425 2. Principal Place of Business			SU	1550 EAST 78TH ST. SUITE 535 BLOOMINGTON MN 55425				DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified 07/29/1992				
2. Principal Place of Business			2a.	2a, Mailing Address				4. FEI Number		Applied For		
21	1		26					41-1642053		Not Applicable		
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.	1	23. 7 - 2124		5. Certificate of Status Desired		.75 Additional ee Required			
23	City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution	•	5.00 May Be dded to Fees		
24	Zip	Country 25	29	Zφ	30 Co	untry		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent ye Yes			
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
	SAPURSTEIN,					81	Name					
9700 SO u th dixie hwy. Suite 1 00 0							Street Address (P.O. Box Number is Not Acceptable)					
SUITE 1000 MIAMI FL-33156					83		_					
	i - ·					84	City	FL	85	Zip Code		

office or i	registered agent, or both, in the State of Flo am familiar with, and accept the obligations	rida. Such change was a	uthorized by the corp	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE .			<u></u>	ura required when reinstating) DATE
	Signature, typed or printed name of registered agent and titl OFFICERS AND DIR		TE: Registered Agent signal.	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DPT OFFICERS AND DIR		1.1 TITLE	
TITLE	BILLINS, J. W.	DELETE		Change Addition
NAME	= -		1.2 NAME	
STREET ADDRESS	1550 E. 79TH ST., #535		1.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGTON MN		1.4 CITY-ST-ZIP	
TITLE	DVP	DELETE	2.1 TITLE	Change Addition
NAME	GIBBS, JAMES W., JR.		2.2 NAME	
STREET ADDRESS	1550 E. 79TH ST., #535		2.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGTON MN		2.4 CITY-ST-ZIP	
TITLE	S	XXI DELETE	3.1 TITLE	S Addition
NAME	K inz el, Jeanne M		3.2 NAME	DONNA J. BILLINS
STREET ADDRESS	521 CASE AVE.		3.3 STREET ADDRESS	6901 W. 84TH STREET SUITE 116
CITY-ST-ZIP	ST. PAUL MN			BLOOMINGTON, MN. 55438
TITLE	D	DELETE	4.1 TITLE	Change Addition
NAME	BILLINS, TODD A		4.2 NAME	
STREET ADDRESS	17374 KODIAK AVENUE WEST		4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKEVILLE MN		4.4 CITY-ST-ZIP	
TITLE	D	DELETE	5.1 THTLE	Change Addition
NAME	BILLINS, KERY V		5.2 NAME	
STREET ADDRESS	3903 CANTER GLEN DR		5.3 STREET ADDRESS	
CITY-ST-ZIP	EAGAN MN 55123		5.4 CITY-ST-ZIP	
TITLE	:	DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CiTY-ST-ZIP	n section 119.07(3)(i). Florida Statutes, I further certify that the information

indicated on this annual report or supplied wint this limit does not quality for the exemption stated in section 113.0 (O)(), relined statutes. Fortine betting the limit indicated on this annual report or suppliemental 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 arrows.

7/12/08 6/3-804-4382