

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 05, 1999 8:00 am**  
**Secretary of State**

03-05-1999 90120 021 \*\*\*150.00

DOCUMENT # **P92000009979**

1. Corporation Name

**BRANNEN MORTGAGE COMPANY, INC.**

Principal Place of Business

**204 W. MAIN ST.  
INVERNESS FL 34450**

Mailing Address

**P.O. BOX 1929  
INVERNESS FL 34451-1929**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/08/1992**

4. FEI Number

**59-3161002**

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 the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

2a. Mailing Address

**26** Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

**BRANNEN, JOE S  
320 U.S. 41 SOUTH  
INVERNESS FL 34450**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CD  
BRANNEN, GEORGE H II  
3300 S. PLEASANT GROVE ROAD  
INVERNESS FL 34452**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VCD  
BRANNEN, JOE S  
SHADY LANE  
INVERNESS FL 34450**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
OSWALD, WAYNE H.  
1380 S. WATERVIEW  
INVERNESS FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
MURPHY, JOSEPHINE A.  
2821 S. EAGLE TERR.  
INVERNESS FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
TESSMER, JEANETTE B.  
8130 E. LOST POND LANE  
INVERNESS FL**

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary

2/12/1999

(352) 726-9001

Date

Daytime Phone #

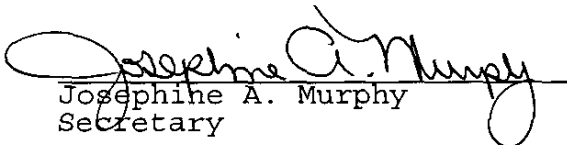
CR2E034 (11/98)

176834-90120-21  
P42000009979

Brannen Mortgage Company, Inc.  
Corporate Annual Report - 1999

No. 12 - Names and Street Addresses of Officers &  
Directors (Cont.)

<u>Title</u>	<u>Names</u>	<u>St. Address</u>	<u>City/State</u>
AVP	Kelly, Karen R.	2311 So. Coleman Avenue	Homosassa, FL 34448
AVP	Schaaf, Sandra R.	433 Hiawatha Ave.	Inverness, FL 34452

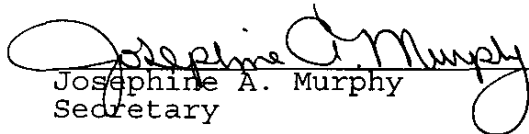
  
Josephine A. Murphy  
Secretary

176834-90120-21  
P92000009979

February 12, 1999

#8 (Attachment)

This corporation files a consolidated intangible tax  
return under Brannen Banks of Florida, Inc., tax  
I.D. No. 59-2067268.

  
Josephine A. Murphy  
Secretary