

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

DOCUMENT # **P93000000689 (8)**

1. Corporation Name

CITIZENS FIRST MORTGAGE COMPANY



Principal Place of Business

Mailing Address

2265 LEE ROAD
SUITE 131
WINTER PARK FL 32789
US

P.O. BOX 729
OVIEDO FL 32765-0729
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2265 Lee Rd.

22 City & State

27 Suite 131

23 Zip

25 Country

28 Winter Park, FL

24

29 32789

30 US

9. Name and Address of Current Registered Agent

MORGAN, ULTIMA D
315 E ROBINSON ST
SUITE 600
ORLANDO FL 32801

81 Name

Julie A. Coombs

82 Street Address (P.O. Box Number is Not Acceptable)

2265 Lee Rd., #131

83

84 City

Winter Park

85 FL

85 Zip Code

32789

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Julie A. Coombs

Date Registered Agent Accepted for Appointment

DATE

4-15-96

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	ABELL, JAMES W	
STREET ADDRESS	2247 SUNNYVIEW DRIVE	
CITY-ST-ZIP	OVIEDO FL	
TITLE	EVPD	<input checked="" type="checkbox"/> DELETE
NAME	LEE, RICHARD H	
STREET ADDRESS	6097 LAKE CHARM CIRCLE	
CITY-ST-ZIP	OVIEDO FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ONDICK, EDWARD R	
STREET ADDRESS	989 GREENTREE DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	YARBOROUGH, EDWARD	
STREET ADDRESS	FIRST STREET	
CITY-ST-ZIP	GENEVA FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CONLEY, JOHNNIE W III	
STREET ADDRESS	636 S. LAKE JESSUP AVENUE	
CITY-ST-ZIP	OVIEDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Julie A. Coombs	
13 STREET ADDRESS	170 Varsity Circle	
14 CITY-ST-ZIP	Altamonte Springs, FL 32714	
21 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Richard O. Tupper	
23 STREET ADDRESS	170 Varsity Circle	
24 CITY-ST-ZIP	Altamonte Springs, FL 32714	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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:

Julie A. Coombs

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

DATE

407-628-0201

DAYTIME PHONE #

CR2E034 (12/95)