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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 24 1997 8:00am

Secretary of State

(96/6)

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000013646 (3)

D & D MORTGAGE SERVICES, INC.

Principal Place of Business Mailing Address 220 FIRST STREET NORTH 220 FIRST STREET NORTH WINTER HAVEN FL 33881-4526 WINTER HAVEN FL 33881 3a. Date of Last Report 3. Date incorporated or Qualified 02/24/1993 03/21/1996 2. Principal Prace of Business 2a. Mailing Address 4. FEI Number Applied For 59-3187517 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Z(0)Country Zip Country 8. This corporation has liability for intengible tax under s. 199.032, 30 **✓** Yes □ No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRANNING, DOYCE D 220 FIRST STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 33881 83 84 City Zip Code 85 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 (NOTE\_Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1 1 TITLE Change Addition TITLE BRANNING, DOYCE D 1.2 NAME NAME 220 FIRST ST. N. 1.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33881 City-St-ZiP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE THILE BRANNING, JANICE T 22 NAME 220 FIRST ST. N. 2.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-\$T-ZIP CITY - ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS ÇiTY+S\*+ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 direction 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 op an attachment with an address.

SIGNATURE:

CITY-ST-ZIP