

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 # P93000013762 (8)

1. Corporation Name

KE MORTGAGE SERVICES, INC.



Principal Place of Business

5440 NW 33 AVE
SUITE 112
FT LAUDERDALE FL 33309-7021

Mailing Address

5440 NW 33 AVE
SUITE 112
FT LAUDERDALE FL 33309-7021

3. Date Incorporated or Qualified

02/24/1993

3a. Date of Last Report

04/17/1995

4. FEI Number

65-0390338

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONNER, RICHARD E
7467 NW 4 ST
FT LAUDERDALE FL 33317

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 must be printed in block letters and must be legible)

(Print Name of Agent and Signature of Receiver of Fees)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
MORRIS, TERRY E
5440 NW 33 AVE #112
FT LAUDERDALE FL 33309-7021

2. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

4. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

5. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

6. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
☐ DELETE

1. 1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP
☐ Change ☐ Addition

2. 2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP
☐ Change ☐ Addition

3. 3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP
☐ Change ☐ Addition

4. 4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
☐ Change ☐ Addition

5. 5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
☐ Change ☐ Addition

6. 6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily 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 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 of fees and that I agree to be bound by 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 amendment with this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY E. MORRIS, PRESIDENT

1/18/96

DATE

(954) 777-5200

TELEPHONE NUMBER

CR2E034 (12/95)