

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
Secretary of State

APPROVED

03/09/1993

06/09/1994

DOCUMENT # **P93000017954 (7)**

MORTGAGE SOLUTIONS, INC.

401 SOUTH MAGNOLIA AVE
ORLANDO FL 32801

401 SOUTH MAGNOLIA AVE.
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Reincorporation 03/09/1993	3a. Date of Last Report 06/09/1994
4. FEI Number 72-1234835	Appeal For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for ad valorem tax under S. 190.02, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Office Location 21	2a. Mailing Address 26	4. FEI Number 72-1234835	Appeal For Not Applicable
22	27 P.O. Box 1547	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	28 Orlando, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	25	29 32802	30

9. Name and Address of Current Registered Agent SHUMAN, W. HARRY 401 SOUTH MAGNOLIA AVE. ORLANDO FL 32801	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 607.01, 607.02 and 607.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent in both of the State of Florida. Such change was authorized by the corporation's board of directors. Liberty and the appointment of the proposed agent. Both banks will comply with the obligations of Sections 607.01 through 607.03, Florida Statutes.

W. Harry Shuman, President April 24, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGABLES TO OFFICERS AND DIRECTORS	
NAME	SHUMAN, W. HARRY	NAME	P/D
STREET ADDRESS	401 SOUTH MAGNOLIA AVE.	STREET ADDRESS	
CITY	ORLANDO FL 32801	CITY	
NAME	E. Linda Guttman	NAME	T/S
STREET ADDRESS	2310 Westminster Terrace	STREET ADDRESS	2310 Westminster Terrace
CITY	Oviedo, FL 32765	CITY	Oviedo, FL 32765
NAME	EVP	NAME	VP
STREET ADDRESS	Charles R. Pelton	STREET ADDRESS	Charles R. Pelton
CITY	199 Sheridan Avenue	CITY	199 Sheridan Avenue
NAME	SVP	NAME	VP
STREET ADDRESS	Sallye Brewer	STREET ADDRESS	Sallye Brewer
CITY	801 North Boulevard	CITY	801 North Boulevard
NAME	D	NAME	D
STREET ADDRESS	James B. Davis	STREET ADDRESS	James B. Davis
CITY	2013 Live Oak Boulevard	CITY	2013 Live Oak Boulevard
NAME	Thomas F. Orthman	NAME	D
STREET ADDRESS	2201 Second Street	STREET ADDRESS	2201 Second Street
CITY	Fort Myers, FL 33901-2919	CITY	Fort Myers, FL 33901-2919

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01, Florida Statutes. I further certify that this information is filed on this annual report or supplemental annual report as required by law and is accurate and that my signature shall have the same legal effect as if made in person with that person and that the signature of the person or persons whose names are on this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 13 of this report or as an attachment with an address.

SIGNATURE: *E. Linda Guttman*
E. Linda GUTTMANN
DIRECTOR AND WITH AN PRINTED NAME OF BOARD OFFICER OR DIRECTOR

4-27-95 (407) 841-1712