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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000024853 (2)

BARCLAY MORTGAGE CORP.

Mailing Address Principal Place of Business 4637 DEL PRADO BLVD. 4637 DEL PRADO BLVD. **CAPE CORAL FL 33904-7446** CAPE CORAL FL 33914 3a. Date of Last Report 3. Date Incorporated or Qualified 04/05/1993 08/07/1996 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For 65-0398797 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032 Yes Florida Statutes [] No 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TEAGUE, GEORGE 4637 DEL PRADO BLVD 82 Street Address (P.O. Box Number is Not Acceptable) CAPE CORAL FL 33904 83 84 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 4-30-97 SIGNATURE (NOT) Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS \_\_\_ Addition 🔲 DELLITE Change TITLE 1.1 1/11/0 TEAGUE, ROSEMARY 1.2 NAME NAME 2616 S.W. 26TH TERR. STREET ADDRESS 1.3 STREET ADDRESS CAPE CORAL FL 33914 CITY-S1-ZIP DELLTE Change Addition TITLE 2.1 TITLE BARZOLA, WILLIAM NAME 2.2 NAME **2616 SW 26TH TERR** STREET ADDRESS 2.3 STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP 2.4 Chy-\$1-7P DELFTE ☐ Change Addition 3.1 TITLE TITLE TEAGUE, GEORGE NAME 3.2 NAMI 4637 DEL PRADO BLVD. STREET ADDRESS 3.3 STREET ADDRESS CAPE CORAL FL 33914 3.4. CITY-ST-7IF CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE FITZGERALD, TODD 4. 2 NAME NAME 4637 DEL PRADO BLVD. STREET ADDRESS 4.3 STREET ADDRESS CAPE CORAL FL 33914 CITY-ST-ZIP 4.4 CITY - \$1 - 7IP DELETE Change Addition 5.1 10116 TITLE 5.2 NAM£ NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(1Y - ST - Z(F DELFTE Change Addition TITLE 6.1 Till ( NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I do 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

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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