## 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

P93000025402 (7) **DOCUMENT #** 

EXPRESS MORTGAGE COMPANY, INC.

Principal Place of Business

Mailing Address

**FILED** Jan 23 1996 8:00 am Secretary of State

	BILLI BEAR BERK	

3561 S.W. CORPORATE PARKWAY PALM CITY FL 34990		3561 S.W. CORPOR PALM CITY FL 3490				
				3. Date Incorporated or Qualified 04/02/1993	3a. Date of Last Report 02/06/1995	
	nat Place of Business	2a. Mailing Address	-	4. FEI Number	Applied For	
Suite, Apt. #, etc.		26     Suite, Apt. #, etc.		65-0391944	Not Applicable	
22		27		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City &	State	City & State		6. Election Campaign Financing	\$5.00 May Bo	
23	T. T. C	28		Trust Fund Contribution	Added to Fees	
Ζιρ <b>24</b>	Country 25	7)p <b>29</b>	Country 30	8. This corporation has liability for it Florida Statutes		
9. Name and Address of Current Registered Agent			30	30 Florida Statutes Yes No  10. Name and Address of New Registered Agent		
			81 Name			
EM'	DDIO, JEANNE		82 Street	Address (P.O. Box Number is Not Acceptable	ο\	
	1 S.W. CORPORATE PARK	(WAY		nddrobs (10. box Ndinos) is Not nocopias		
PAI	M CITY FL 34990		83			
			84 City		FL 85 Zip Code	
11. Parsi	lant to the provisions of Section	is 607,0502 and 607,1508, Florida Stat	tutes, the above named co	rporation submits this statement for the pur board of directors. I hereby accept the appo	oose of changing its registered office	
farnil	ar with, and accept the obligation	ons of Saction 607,0505, Florida Statut	les.	board or directors: I hereby accept the appo	Antment as registered agent. I am	
SIGNATU		middle	<u> </u>		repro.	
T2. OFFICERS AND DIRECTORS			(NOTE Registered Agent signature re	ADDITIONS/CHANGES TO OFFI	DATE CEDS AND DIRECTORS IN 42	
TITLE	PTDV	DELETE	4 4 7 17 17			
NAME	EMIDDIO, JEANNE		1.2 NAME	BYO SW 27th St &	4 6	
STHEET ADDRESS 8561:8.WCORPORATE: PARKWAY-			1.3 STREET ADDRESS		3e 2	
CHY-ST-ZIF	PALM CITY-FL-		1.4 CITY-ST-ZIP	POIN CITY TE	34440	
THEF		, DELETE	2 1 TITLE	) .	Change Addition	
NAME	N/OD		22 NAME			
STREET ADDS			23 STREET ADDRESS			
C-1Y-S1-Z-F TillE		DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition	
NAME		<b></b>	3.2 NAME		El Autubo El Vidulion	
STREET ADDR	RESS		3.3 STREET ADDRESS			
C-1Y - ST - 7 F		Na N	3.4 CITY-ST-ZIP			
TITLE		DELETE	4. 1 TITLE		☐ Change ☐ Addition	
NAME			4.2 NAME			
STREET ADDE	1		4.3 STREET ADDRESS			
CHY-S1-ZIF		DELETE	4.4 CITY - ST - ZIP			
NAM!		[] הנוגונ	5 1 TITLE		Change Maddition	
STREET ADDR	ess.		5.2 NAME 5.3 STREET ADDRESS			
CITY-ST-ZIF			5 3 STREET ADDRESS 1			
TITLE		DELETE	6 1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME		□ s8s	
STREET ADDE	166					
	452		6 3 STREET ADDRESS			

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: