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 # P93000040025

1. Corporation Name: GRANT MORTGAGE SERVICES, INC.

Principal Place of Business: 10014 N. DALE MABRY #214 TAMPA, FL 33618

Mailing Address: 10014 N. DALE MABRY #214 TAMPA, FL 33618

2. Principal Place of Business	2a. Mailing Address
21 10014 N. DALE MABRY	26 10014 N. DALE MABRY
22 Suite, Apt #, etc. #214	27 Suite, Apt. #, etc. #214
23 City & State TAMPA FL	28 City & State TAMPA FL
24 Zip 33618 / 25 Country	29 Zip 33618 / 30 Country

3. Date Incorporated or Qualified: 06/04/1993
3a. Date of Last Report:
4. FEI Number: 59-3185819 ☐ 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

9. Name and Address of Current Registered Agent

NEIL SCHECHT
4830 W. KENNEDY BLVD.
#280
TAMPA, FL. 33809

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 607.0502 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT D	☐ DELETE
NAME	RUSSELL SEED	
STREET ADDRESS	1596 PINE LAKE DR.	
CITY-ST-ZIP	NAPERVILLE, IL. 60564	
TITLE	SECRETARY D	☐ DELETE
NAME	LAURA SEED	
STREET ADDRESS	1596 PINE LAKE DR.	
CITY-ST-ZIP	NAPERVILLE, IL. 60564	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT - DIRECTOR	☐ Change ☐ Addition
1.2 NAME	RUSSELL SEED	
1.3 STREET ADDRESS	1596 PINE LAKE DR.	
1.4 CITY-ST-ZIP	NAPERVILLE, IL. 60564	
2.1 TITLE	SECRETARY - DIRECTOR	☐ Change ☐ Addition
2.2 NAME	LAURA SEED	
2.3 STREET ADDRESS	1596 PINE LAKE DR	
2.4 CITY-ST-ZIP	NAPERVILLE, IL. 60564	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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: PRESIDENT RUSSELL SEED 4/27/96 (813)264-9616

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR