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 # **P93000041238 (5)**

1. Corporation Name

BENCHMARK MORTGAGE CORPORATION

Principal Place of Business	Mailing Address
30 COLORADO ROAD LEHIGH ACRES FL 33936	30 COLORADO ROAD LEHIGH ACRES FL 33936

3. Date Incorporated or Qualified	3a. Date of Last Report
06/10/1993	04/28/1995

2. Principal Place of Business	2a. Mailing Address
21	26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number **65-0415589** — 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

BAGANS, ROSETTA
30 COLORADO ROAD
LEHIGH ACRES FL 33936

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 617.1502, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TYPE	D ☐ DELETE	1 TYPE: T/S/D	☑ Change ☐ Addition
NAME	BAGANS, ROSETTA	2 NAME	
STREET ADDRESS	30 COLORADO ROAD	3 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL 33936	4 CITY-ST-ZIP	
2 TYPE	D ☐ DELETE	5 TYPE: P/D	☑ Change ☐ Addition
NAME	BAGANS, ROBERT	6 NAME	
STREET ADDRESS	30 COLORADO ROAD	7 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL	8 CITY-ST-ZIP: - 33936	
3 TYPE	☐ DELETE	9 TYPE: V	☐ Change ☑ Addition
NAME		10 NAME: KAREN Fuller	
STREET ADDRESS		11 STREET ADDRESS: 28 Colorado Rd	
CITY-ST-ZIP		12 CITY-ST-ZIP: Lehigh FL 33936	
4 TYPE	☐ DELETE	13 TYPE	☐ Change ☐ Addition
NAME		14 NAME	
STREET ADDRESS		15 STREET ADDRESS	
CITY-ST-ZIP		16 CITY-ST-ZIP	
5 TYPE	☐ DELETE	17 TYPE	☐ Change ☐ Addition
NAME		18 NAME	
STREET ADDRESS		19 STREET ADDRESS	
CITY-ST-ZIP		20 CITY-ST-ZIP	
6 TYPE	☐ DELETE	21 TYPE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	

CR2E034 (12/95)

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 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 added by this amendment, with an address.

SIGNATURE: [signature] ROBERT BAGANS 2-9-96 941 369-5844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #