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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

SIGNATURE:

Secretary of State

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DOCUN L. Corporation N	Name		1642 (5	<b>)</b>					
RESID	ential Lenders, Inc								
Pancipal Place c	of Business	Mailin	g Address				if <b>UU</b> IST <b>UU</b> III 1	UIII UUIUI IIVIU UI	11 01014 1101 1091
3504 LAKE I SUITE 380 ORLANDO F		S	io4 lake lynda d Uite 380 Rlando fl 32817	R					
US	C GEOTT	Ü				3. Date Incorporated or Qualifie 01/06/1994	ed <b>3a</b> . [	Date of Last Re <b>06/12/19</b>	
. Principal Plac	ce of Business	2a. Ma 26	ailing Address			4. FEI Number 59-3248201		L	pplied For lot Applicable
Suite, Apt. #,	, etc.	Sı	iite, Apt. #, etc.			5. Certificate of Status Desired	×		Additional lequired
City & State			ty & State			6. Election Campaign Financing	9 🗆	\$5.00	) May Be
Zip	Country	28 Zq	p	Count	ту	Trust Fund Contribution  8. This corporation has liability	for intangib	ie tax under s	to Fees 199.032,
<u> </u>	25 9. Name and Address of Cu	29 urrent Register	ed Agent	30		Florida Statutes L  10. Name and Address of Ne	Yes 🔣 No w Register		
	<b>9</b>			8	1 Name				
VICKERS, JOHN 3504 LAKE LYNDA DR SUITE 380					2 Street Addr	ddress (P.O. Box Number is Not Acceptable)			
					3		·		
	DO FL 32817				4 City			B5 Zip	Code
							_	— 1 1	
1 Pursuant to	the provisions of Sections 607	0502 and 607.1	508 Florida Statuti	es, the above	named corpor	ration submits this statement for the	purpose o	f changing its r	agisterea omice
or registere	o the provisions of Sections 607, ad agent, or both, in the State of a and accept the obligations of,	Florida Such ch	nange was authoriz	ed by the co	named corpor rporation's boa	ration submits this statement for the rd of directors. I hereby accept the	purpose o appointmer	f changing its re it as registered	agistered office agent. I am
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03-08-96 (407) 6584600