

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Myrtham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name: Caliber Mortgage Company FT. LAUDERDALE P94000018249			
Principal Place of Business: 777 S. Flagler Dr. Suite 221 West Palm Beach, FL 33401		Mailing Address: 777 S. Flagler Dr. Suite 221 West Palm Beach, FL 33401	
2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified: 6-28-94		4. FEI Number: 65-0509461	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent: Ronald G. Fishman 777 S. Flagler Dr. Suite 221 West Palm Beach, FL 33401		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 607.0503 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: _____ (Signature, type and print name of officer or director, as applicable) (NOTE: Registered Agent signature required when constituting)			
12. OFFICERS AND DIRECTORS: TITLE D NAME Ronald G. Fishman STREET ADDRESS 777 S. Flagler Dr. CITY-ST-ZIP Suite 221 West Palm Beach, FL 33401 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 1. TITLE ☐ Change ☐ Addition 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP 5. TITLE ☐ Change ☐ Addition 6. NAME 7. STREET ADDRESS 8. CITY-ST-ZIP 9. TITLE ☐ Change ☐ Addition 10. NAME 11. STREET ADDRESS 12. CITY-ST-ZIP 13. TITLE ☐ Change ☐ Addition 14. NAME 15. STREET ADDRESS 16. CITY-ST-ZIP 17. TITLE ☐ Change ☐ Addition 18. NAME 19. STREET ADDRESS 20. CITY-ST-ZIP 21. TITLE ☐ Change ☐ Addition 22. NAME 23. STREET ADDRESS 24. CITY-ST-ZIP 25. TITLE ☐ Change ☐ Addition 26. NAME 27. STREET ADDRESS 28. CITY-ST-ZIP 29. TITLE ☐ Change ☐ Addition 30. NAME 31. STREET ADDRESS 32. CITY-ST-ZIP 33. TITLE ☐ Change ☐ Addition 34. NAME 35. STREET ADDRESS 36. CITY-ST-ZIP 37. TITLE ☐ Change ☐ Addition 38. NAME 39. STREET ADDRESS 40. CITY-ST-ZIP 41. TITLE ☐ Change ☐ Addition 42. NAME 43. STREET ADDRESS 44. CITY-ST-ZIP 45. TITLE ☐ Change ☐ Addition 46. NAME 47. STREET ADDRESS 48. CITY-ST-ZIP 49. TITLE ☐ Change ☐ Addition 50. NAME 51. STREET ADDRESS 52. CITY-ST-ZIP 53. TITLE ☐ Change ☐ Addition 54. NAME 55. STREET ADDRESS 56. CITY-ST-ZIP 57. TITLE ☐ Change ☐ Addition 58. NAME 59. STREET ADDRESS 60. CITY-ST-ZIP 61. TITLE ☐ Change ☐ Addition 62. NAME 63. STREET ADDRESS 64. CITY-ST-ZIP 65. TITLE ☐ Change ☐ Addition 66. NAME 67. STREET ADDRESS 68. CITY-ST-ZIP 69. TITLE ☐ Change ☐ Addition 70. NAME 71. STREET ADDRESS 72. CITY-ST-ZIP 73. TITLE ☐ Change ☐ Addition 74. NAME 75. STREET ADDRESS 76. CITY-ST-ZIP 77. TITLE ☐ Change ☐ Addition 78. NAME 79. STREET ADDRESS 80. CITY-ST-ZIP 81. TITLE ☐ Change ☐ Addition 82. NAME 83. STREET ADDRESS 84. CITY-ST-ZIP 85. TITLE ☐ Change ☐ Addition 86. NAME 87. STREET ADDRESS 88. CITY-ST-ZIP 89. TITLE ☐ Change ☐ Addition 90. NAME 91. STREET ADDRESS 92. CITY-ST-ZIP 93. TITLE ☐ Change ☐ Addition 94. NAME 95. STREET ADDRESS 96. CITY-ST-ZIP 97. TITLE ☐ Change ☐ Addition 98. NAME 99. STREET ADDRESS 100. CITY-ST-ZIP	
14. I hereby certify that the information supplied in this form does not qualify for the exemption stated in Section 119.07(3)(c), 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; that the registered office or business address is as shown on this report; and that my name appears in Block 12 or Block 13 of this document.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		700002524807 -05/15/98-01010-033 ***150.00 4/10/98 561-832-1660	

CR2E034 (10/97)