

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

55 MAY -1 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000084655 (7)

1. Corporation Name

FIRST FLORIDA MORTGAGE GROUP, INC.

Principal Place of Business

**8128 FRONT BEACH ROAD, SUITE K
PANAMA CITY BEACH FL 32407**

Mailing Address

**8128 FRONT BEACH ROAD, SUITE K
PANAMA CITY BEACH FL 32407**

(DO NOT WRITE IN THIS SPACE)

2. Principal Place of Business

21 7950 Front Beach Road

2a. Mailing Address

26 7950 Front Beach Road

3. Date incorporated or created

11/21/1994

3a. Date of Last Report

N/A

4. FEI Number

59-3280841

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**

7. The corporation has adopted the uniform accounting system of the Florida Statutes

☒ Yes

☐ No

22. State Apt. # etc.

27. State Apt. # etc.

23. City & State

28. City & State

23 Panama City Beach, Florida

28 Panama City Beach, Florida

24. ZIP Code

25. USA

29. ZIP Code

30. USA

9. Name and Address of Current Registered Agent

**SARTE, JAIME
8128 FRONT BEACH ROAD, SUITE K
PANAMA CITY BEACH FL 32407**

10. Name and Address of New Registered Agent

81. Name

Jaime Sarte

82. Street Address (P.O. Box Number is Not Acceptable)

7950 Front Beach Road

83. City

84. City

Panama City Beach

FL

85. Zip Code

32407

11. Pursuant to the provisions of Sections 607.0507 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 607.0508, Florida Statutes.

SIGNATURE

Jaime Sarte, President

4/28/95

12. OFFICERS AND DIRECTORS

**1. TITLE: SARTE, JAIME
2. NAME: 6927 N. LAGOON DR.
3. STREET ADDRESS: PANAMA CITY BEACH FL 32408
4. CITY, ST, ZIP:**

**1. TITLE: SARTE, EMELIE
2. NAME: 6927 N. LAGOON DR.
3. STREET ADDRESS: PANAMA CITY BEACH FL 32408
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I declare under penalty of perjury that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1), Florida Statutes. I further certify that the information included 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 of this report or on an attachment with an address.

SIGNATURE:

Jaime Sarte, President

4/28/95 (904)230-7994