

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000007828 (3)

1. Corporation Name

WAGNER MORTGAGE CORP.

Principal Place of Business

1761 W. HILLSBORO BLVD.
SUITE 315
DEERFIELD BEACH FL 33441

Mailing Address

1761 W. HILLSBORO BLVD.
SUITE 315
DEERFIELD BEACH FL 33441

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

22

Suite 329

23

City & State

24

Zip

25

Country

26

Suite, Apt. #, etc.

27

Suite 329

28

City & State

29

Zip

30

Country

9. Name and Address of Current Registered Agent

WAGNER, MARY
1761 W. HILLSBORO BLVD.
SUITE 315
DEERFIELD BEACH FL 33441

11. Pursuant to the provisions of Sections 607.02 and 607.1504, 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 607.02(5), Florida Statutes.

SIGNATURE

Mary Wagner

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME WAGNER, MARY
STREET ADDRESS 1761 W. HILLSBORO BLVD., SUITE 315
CITY-STATE-ZIP DEERFIELD BEACH FL 33441

2. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

3. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

7. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 1761 W Hillsboro Blvd, Suite 329
CITY-STATE-ZIP Deerfield Beach, Florida 33442

2. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

3. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

7. TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

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)(c), Florida Statutes. I further certify that the information included on this annual report does apply to the annual report for the current year 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 registered business organization to be reported in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or both, or on an attached sheet with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Mary Wagner

2-6-96

954-360-0051

CR2E034 (12/95)