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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000038633 (0)

MAINLAND MORTGAGE CORPORATION

				·				<b>                               </b>
Principal Plac	e of Business	Mailing Address		}			istat inin kidål	. 14488 11LL 1891
5353 N FEDERAL HWY SUITE 305 FT LAUDERDALE FL 33308		RICHARD POTTER 898 N. FEDERAL HWY.: POMPANO DEACH FE SC	898 N. FEDERAL HWY. #9H 5353 N. PEIXE		DO NOT WRIT	E IN THIS	SPACE	
US		Fī	Leadose ante	<u>بي</u> [	3. Date Incorporated or Qualified			3.0
			<u> </u>		05/15/1995			
	lace of Business	2a. Mailing Address	NARAL HU	2/4	4. FEI Number		— <del>                                    </del>	oplied For
21			beral An	170	65-0587750			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 SUITE 305	<b>-</b>		5. Certificate of Status Desired	×		Additional equired
City & State	6	City & State			6. Election Campaign Financing	<del>- ; -</del>		Mav Be
23	-	28 FT. CAUDERY	Michigan Contraction		Trust Fund Contribution		,	to Fees
Zip	Country	Zio	Country		8. This corporation owes or has p	aid the cur	rent year In	angible
24	25	29 33308 s	08X		Personal Property Tax due June	<u>30. [</u>	∐ Yes 🚺	No No
	9. Name and Address of Current F	Registered Agent	.,		10. Name and Address of New Ro	egistered .	Agent	
	ICHARD POTTER		81 Name	•				
					s (P.O. Box Number is Not Accepta	ble)	-	
FT LAUDERDALE FL 33308						<u> </u>		
			83					
			84 City				85 Zip	Code
	to the provisions of Sections 607.0502 a					<u>, FL</u>		<u> </u>
	egistered agent, or both, in the State of m familiar with, and accept the obligation	Fiorida, Such change was au ons of, Section 607.0505, Flori	thorized by the cor da Statutes.	poration	's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE.	Registered Agent signature	e required v	when reinstating)	DATE		
12.	OFFICERS AND D	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND		S IN 12
TITLE	PTSD	☐ DELETE	1.1 TITLE				Change	Addition
NAME	POTTER, RICHARD		1,2 NAME	1				
STREET ADDRESS	5353 N FEDERAL HWY #305		1.3 STREET ADDRESS	į .				
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP					
TITLE	V	DELETE	2.1 TITLE				☐ Change	Addition
NAME [	DUQUETTE, KENNETH		2,2 NAME	ļ				
STREET ADDRESS	5353 N FEDERAL HWY #305		2.3 STREET ADDRESS	İ				
CITY-ST-ZIP	FT. LAUDERDALE FL		2,4 CITY-ST-ZIP	1	A LOCAL DE ACTION		Mr oi	
TITLE	D OLSON BIANA M	DELETE	3.1 TITLE	DIC	(CHIEF EXECUTIVE OFFICE	7 <b>~</b> )	Change	f Addition
NAME	OLSON, DIANA M 5353 N FEDERAL HWY #305		3.2 NAME	} `				
STREET ADDRESS			3.3 STREET ADDRESS	ĺ				
CITY-ST-ZIP	FT LAUDERDALE FL	DELETE	3.4. CITY - ST - ZIP	ļ			Change	Addition
TITLE		☐ DECEIE	4.† TITLE	ļ			☐ oliands	
NAME			4. 2 NAME					
STREET ADDRESS			4,3 STREET ADDRESS	İ				
CITY-ST-ZIP		T DELET	4.4 CITY-ST-ZIP	<del> </del>			Channa	T Addistre
TITLE		DELETÉ	5,t TITLE	1			Change	Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 on an attackment with am eddress.

6.4 CITY - ST- ZIP

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST-ZIP

TITLE

1/6/98 (954)493-8668

Change

**FILED** 

Jan 21 1998 8:00am

Secretary of State