

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000050696 (0)

1. Corporation Name

SUNDIAL MORTGAGE CORPORATION



Principal Place of Business

14255 U.S. HIGHWAY ONE, SUITE 217
JUNO BEACH FL 33408

Mailing Address

14255 U.S. HIGHWAY ONE, SUITE 217
JUNO BEACH FL 33408

2. Principal Place of Business

21 14255 U.S. Highway one

Suite, Apt. #, etc.

22 211

City & State

23 JUNO BEACH, FL

Zip

24 33408

Country

25 USA

2a. Mailing Address

26 14255 U.S. Highway one

Suite, Apt. #, etc.

27 Suite 211

City & State

28 JUNO BEACH, FL

Zip

29 33408

Country

30 USA

3. Date Incorporated or Qualified
06/28/1995

3a. Date of Last Report
N/A

4. FEI Number

65-0592229

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

CRAIG A. FOSTER

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

279 SUSSEX Circle

83

84 City

Jupiter

FL

85 Zip Code

33458

11. Pursuant to the provisions of Sections 607.0502 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

Craig A. Foster

Signature, typed or printed name of registered agent and the corporation

(NOTE: Registered Agent's signature required when resigning)

DATE

4/22/96

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D FOSTER, CRAIG A

14255 US HIGHWAY ONE, SUITE 217

JUNO BEACH FL 33408

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

P/V/T/S

CRAIG A. FOSTER

279 SUSSEX Circle

Jupiter, FL 33458

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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)(k), 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 attachment with an address.

SIGNATURE:

Craig A. Foster, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96

407-775-2777

Date

Daytime Phone

CR2E034 (12/95)