

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 # **P95000065450 (5)**

1. Corporation Name

~~BOSH, INC.~~

*HomeTown Mortgage Corp
(Effective 2-7-96)*

*NC
2/15/96*



Principal Place of Business

Mailing Address

~~2110 NW 118TH AVE
PEMBROKE PINES FL 33026-1024~~

~~2110 NW 118TH AVE
PEMBROKE PINES FL 33026-1024~~

3. Date Incorporated or Qualified
08/23/1995

3a. Date of Last Report

2. Principal Place of Business

21 **2334 N.W. 187 AVE**

Suite, Apt. #, etc.

23 City & State

24 Zip **33029**

25 Country

2a. Mailing Address

26 **2334 N.W. 187 AVE**

Suite, Apt. #, etc.

27 City & State

29 Zip **33029**

30 Country

4. FEI Number

05-0609078

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

9. Name and Address of Current Registered Agent

**BONATE, DOUGLAS J
2110 NW 118TH AVE
PEMBROKE PINES FL 33026-1024**

81 Name

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

2334 N.W. 187 AVE

83

84 City

FL

85 Zip Code

33029

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 607.0506, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent or registered agent)

(Print) Registered Agent Signature (Typed or printed name)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
D	BONATE, DOUGLAS J	2110 NW 118TH AVE	PEMBROKE PINES FL 33026-1024	<input type="checkbox"/>
D	BONATE, SHELLEY	2110 NW 118TH AVE	PEMBROKE PINES FL 33026-1024	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED	Change	Addition
11		2334 N.W. 187 AVE	33029	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21		2334 N.W. 187 AVE	33029	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
31				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41		600001840596	-05/28/96--01031--010	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
51		***208.75		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OC 5/1/96

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: *Douglas J. Bonate* Douglas J. Bonate.

4/29/96

(954)450-5774

CR2E034 (12/95)