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 # **P95000066529 (5)**

1. Corporate Name

BESTWAY MORTGAGE COMPANY, INC.

Principal Office Address

6166 HALFMOON DRIVE
PORT ORANGE FL 32127

Mailing Address

6166 HALFMOON DRIVE
PORT ORANGE FL 32127

2. Mailing Address
21 316 DUNLAWTON AV
22
23 Port ORANGE, Fl.
24 32127 25 VOLUSIA

2a. Mailing Address
26
27
28
29 30

3. Date Incorporated or Qualified: 08/29/1995

3a. Date of Last Report

4. FEI Number: 59-3335967 — 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

FOSTER, WALTER E III
315 SOUTH PALMETTO AVE.
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to s. 607.0501(3), 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. To the best of my knowledge, the corporation has complied with the provisions of s. 607.0501, Florida Statutes. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of s. 607.0501, Florida Statutes.

Signature

12 OFFICERS AND DIRECTORS

PD
PATRICK, JERRY L
6166 HALFMOON DRIVE
PORT ORANGE FL 32127

VSTD
PATRICK, VIRGINIA A
6166 HALFMOON DRIVE
PORT ORANGE FL 32127

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the officers, directors, or managing members listed above have not been convicted of a felony or other crime which would disqualify them from serving in their respective capacities. I further certify that I am familiar with the provisions of Chapter 607, Florida Statutes, 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 other person authorized to execute the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attached list, with the title or capacity stated above.

SIGNATURE: Jerry L Patrick — 1-23-96 — 904-760-3174

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

Jerry L Patrick

CR2E034 (12/95)