

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000069101 (0)
 1. Corporation Name
BANCSOURCE MORTGAGE CORP.



Principal Place of Business Mailing Address
21485 CAMPO ALLEGRO DRIVE BOCA RATON FL 33433

3. Date Incorporated or Qualified **09/07/1995** 3a. Date of Last Report **n/a**
 4. FEI Number **65-060091** 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. 191.032 Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 **125 SE MIZNER BLVD** 26 **21246 ST ANDREWS BLVD**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 **14** 27 **SUITE 4U**
 City & State City & State
 23 **BOCA RATON, FLORIDA** 28 **BOCA RATON, FLA**
 Zip Country Zip Country
 24 **33433** 25 **FLORIDA** 29 **33433** 30 **FLORIDA**

9. Name and Address of Current Registered Agent
PAPAGNO, JAMES
21485 CAMPO ALLEGRO DRIVE
BOCA RATON FL 33433

10. Name and Address of New Registered Agent
 81 Name **HARRY K ROBINSON**
 82 Street Address (P.O. Box Number is Not Acceptable) **1416 OXFORD LANE**
 83 **1**
 84 City **BOYNTON BEACH, FL** 85 Zip Code **33426**

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 *[Signature]* **JAMES PAPAGNO** *[Signature]* **HARRY ROBINSON** 7/9/96

12. OFFICERS AND DIRECTORS
 TITLE OFFICER DIRECTOR
 NAME **PAPAGNO, JAMES**
 STREET ADDRESS **21485 CAMPO ALLEGRO DRIVE**
 CITY-ST-ZIP **BOCA RATON FL 33433**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 11 TITLE Change Addition
 NAME **HARRY K ROBINSON (D)**
 12 NAME **1416 OXFORD LANE**
 13 STREET ADDRESS **BOYNTON BEACH, FLA 33426.**
 14 CITY-ST-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)(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **JAMES PAPAGNO** *[Signature]* **HARRY ROBINSON** 7/9/96 1900 201 5366

CR2E034 (3/96)