

HOW: 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 # P9500085100 (2)

1. Corporation Name

REAL ESTATE MORTGAGE PROFESSIONALS, INC.

Principal Place of Business

130 WHITECAPS CIRCLE
MAITLAND FL 32751

Mailing Address

130 WHITECAPS CIRCLE
MAITLAND FL 32751



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/02/1995		3a. Date of Last Report	
21 610 S. Maitland Ave.		26 same as 2.		4. FEI Number 59-3344303		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 City & State Maitland, Florida		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip 32751		25 Country U.S.A.		29 Zip		30 Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
TAUSCHER, HEIDI M 1521 MOUNT VERNON STREET ORLANDO FL 32803				81 Name Philip L. Logas, Esq.			
				82 Street Address (P.O. Box Number is Not Acceptable) 34 E. Pine Street			
				83			
				84 City Orlando			
				85 Zip Code FL 32801			

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 typed or printed name of registered agent (not to be applicable)

Philip L. Logas

(NOTE: Registered Agent signature required when reinstating)

April 19, 1996

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	Director/President <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRUNER, TERRY A	1.2 NAME	Bruner, Terry A
STREET ADDRESS	130 WHITECAPS CIRCLE	1.3 STREET ADDRESS	610 S. Maitland Ave.
CITY-ST-ZIP	MAITLAND FL 32751	1.4 CITY-ST-ZIP	Maitland, FL 32751
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	Director/Secretary/Tr/VP <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HALL, GREGORY B	2.2 NAME	Hall, Gregory B
STREET ADDRESS	1640 APACHE TRAIL	2.3 STREET ADDRESS	610 S. Maitland Ave.
CITY-ST-ZIP	MAITLAND FL 32751	2.4 CITY-ST-ZIP	Maitland, FL 32751
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Director/Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Christopher J. Mencis
STREET ADDRESS		3.3 STREET ADDRESS	610 S. Maitland Ave.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Maitland, FL 32751
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Terry A. Bruner

Terry A. Bruner, President April 1996 407-629-8808

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE

CR2E034 (12/95)