## FILÉ NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P960000 SOUTHERN HOME MORTGAGE, INC. P96000045517 (5)

Principal Place of Business

4215 SOUTHPOINT BOULEVARD #100 JACKSONVILLE FL 32216

Mailing Address

4215 SOUTHPOINT BOULEVARD #100 JACKSONVILLE FL 32216-0999

## **FILED** May 02 1997 8:00am Secretary of State



						<ol> <li>Date Incorporated or Qualified 05/28/1996</li> </ol>	3a. Date of Last	Report	
2. Principal Pl	ace of Business	2a. Mailing Addr	Mailing Address			4. FEI Number	<u> </u>	Applied For	
21 1 Bay	Gull Court	26	6			59-3382006	59-3382006 Not Applie		
Sulte, Apt. 4	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Cortificate of Status Desired	\$8.75	Additional	
22		27				5. Certificate of Status Desired	Fee	Required	
City & State		City & State	in in the second of the second			6. Election Campaign Financing	- O O O Midy Bo		
	a Beach, Florida	28	····			Trust Fund Contribution	LJ Adde	d to Fees	
Zip 2 24 32119		Ζίρ		intry		8. This corporation has liability for i		s. 199.032,	
24: 32119	25 US US 9. Name and Address of Curre	nt Registered Agent	30	r		Florida Statules  10. Name and Address of New Re	Yes No		
AN	SBACHER, LEWIS			81	Name	The second secon	giotorea Agent		
100 NATIONAL FINANCIAL BUILDING 4215 SOUTHPOINT BOULEVARD									
					82 Street Address (P.O. Box Number is Not Acceptable)				
	CKSONVILLE FL 32216			83					
				84	City		FL 85 Z1	p Code	
11. Pursuant te	o the provisions of Sections 607.050	02 and 607 1508, Florid	a Statutes, the a	LL	-named	corporation submits this statement for the population's board of directors. Thereby acceptions		its registered	
office or re	egistered agent, or both, in the State n familiar with, and accept the oblig	of Florida, Such chang ations of Section 607 (	go was authorize 3505, Florida Stal	d by	the corp	poration's board of directors. I hereby accep	ot the appointment a	as registered	
SIGNATURE		, construction of	5550,1 151100 610						
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registere	d Ager	nt signature	e required when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	SCHWARTZ, WINSTON	□ D£	LETE 1.1 TI	1LF		VS	<b>X</b> Change	e 🎇 Addition	
NAME	2901-WEST STATE ROAD 4	04-8404.	1.2 N	\Mi		Schwartz, Winston			
STREET ADDRESS	LONGWOOD FL 32779	o <del>s wi</del> ot	1.3 \$	KUL	ADURESS	1 Bay Gull Court			
CITY-ST-ZIP	D CONGROUD PL 324/8			TY-ST	- ZiP	Daytona Beach, Florida	32119		
TITLE	ADLEY, JAMIE	☐ DF	LETE 2.11)	TEF		PT	X Change	e L Addition	
NAME	2901 WEST STATE BOAD 4	24 4124	2.2 N	ME		Adley, Jamie			
STREET ADORESS	LONGWOOD FL 32778	<del></del>			ADDRESS	1 Bay Gull Court			
CITY-ST-ZIP TITLE		D(		11Y - S.	1 - ZIP	Daytona Beach, Florida	32119		
NAME		On					☐ Change	B Addition	
STREET ADDRESS			3.2 N		.000.00				
					ADDRESS				
CITY-ST-ZIP TITLE		DE		ITY-SI	1-7)P		Change	e Addition	
NAME			4.2 N				LT Outside	, LJ Addition	
STREET ADDRESS					ADDRESS 1				
CITY-ST-ZIP				1Y - S!					
TITLE	****	DE DE			711		Change	e Addition	
NAME			5 2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				1Y-S1					
TITLE		□ D£					Change	e Addition	
NAME			62 N	ME			_ •	<del></del> ··	
STREET ADDRESS			635	REEL A	ADDRESS				
CITY-ST-ZIP				TY-\$T					
intormation I am an of	n i <b>ndicate</b> d on this annual report or .	supplemental annual re r the receiver or trusted	ot qualify for the port is true and a empowered to a	ехол	nption s	stated in Section 119.07(3)(i), Florida Statute d that my signature shall have the same lega roport as required by Chapter 607, Florida S	l offact as it made i	index anthothal	