FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF DOCUMENT # P9600083656 (4)

CHANNING LENDING CORPORATION XXVI

FILED Apr 21 1998 8:00am Secretary of State



CR2E034

Mailing Address Principal Place of Business 4214 NW 60TH DRIVE 4214 NW 60TH DRIVE **BOCA RATON FL 33496 BOCA RATON FL 33496** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/10/1996 2. Principal Place of Business
3300 PGA BIVD 2a. Mailing Address 26 3 3 0 0 4. FEI Number Applied For 65-0704945 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired **55** s *55*0 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing v P.B.G \Box Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible U30 <u>U5A</u> 25 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COBER CORPORATE AGENTS, INC. 2601 SOUTH BAYSHORE DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) 19TH FLOOR 83 **MIAMI FL 33133** 84 City Zip Code 85 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TITLE Change Addition CHANNING, JOEL B NAME 1.2 NAME 4214 NW 60TH DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change DCVP TITLE Addition 2.1 TO LE CHANNING, JON H NAME 2.2 NAME 4214 NW 60TH DRIVE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 51 TITLE Change ■ Addition NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change ☐ Addition 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplimental 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 conforation of 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 changes; of an attachment with an advice.

SIGNATURE: