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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084423 (8)

P.G.R. MORTGAGE, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- 140011001 IVA 18110 BUTGU DASAR DUNIN DASIL BUDIN	ili Blaif Di afa il	
15248 S.U.S. 41 STE 900-23 15678 LIGHTBLUE CIRCLE FT MYERS FL 33908 FT MYERS FL 33908 US						DO NOT WRITE IN THIS SPACE		
68						3. Date Incorporated or Qualified		
						10/08/1996		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For
21 26						65-0705783	N	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27						6. Certificate of Status Desired		Additional lequired
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country Zip (25) 29 30			Country		This corporation owes or has paid the corporate Personal Property Tax due June 30.		ntangible No
	9, Name and Address of Curre			Γ		10. Name and Address of New Registered	Agent	=
RHA	OTOLO, PHILIP G			81	Name			
15678 LIGHTBLUE CIRCLE				62	Street Addre	ess (P.O. Box Number is Not Acceptable)		
FT	MYERS FL 33908			83				
				84	City		85 Zip	Code
				-	City	Fi	_ 65 2.10	COOL
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was	s authorize	d by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing i pointment as	its registered s registered
SIGNATURE	Signature, typed or printed name of registered ag	and and tile if acceptable (AV	NE: Busislara	d Aga	un) Pinnalura rom éro	ed when reinstating) DATE		
12.		ID DIRECTORS	13.	o Age	ant signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 (TLE			Change	Addition
NAME	RUOTOLO, PHILIP G		1.2 N	1.2 NAME				
STREET ADDRESS			1.3 ST	1.3 STREET ADDRESS				
CITY-ST-ZIP	FF 45/FFG F1 44444		1.4 CI	TY-S	T-ZIP			
TITLE	DELETE 211		TLE			☐ Change	Addition	
NAME	2.2		2.2 N	ME				
STREET ADDRESS			2.3 STREI		ADDRESS			i
CITY-ST-ZIP	ZIP		2 4 C	2 4 CITY-ST-ZIP				
TITLE	☐ DELETE		3.1 Ti	3.1 THE			☐ Change	Addition
NAME			3.2 N	ME				
STREET ADDRESS			3.3 \$7	REET	address			
CITY-ST-ZIP		<u>_</u>	3.4 C	17Y-S	r-ZIP			
TITLE		☐ DELETE	4.1 TI	TLE			☐ Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS					address			
CITY-ST-ZIP			4.4 Ci	TY-S	r - ZIP			
TITLE		☐ DELETE	5.1 Ti				Change	Addition
NAME			5.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DOLETE	5400		r-ziP		T 05	A district
TITLE		DELETE	, 6.1 TH				☐ Change	Addition
NAME			6.2 NA					
STREET ADDRESS					ADORESS			
CITY-ST-ZIP			6.4 CI	Y-\$1	r-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 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 truette 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 attachment with an address.

SIGNATURE AND TYPES OR PRINTED THE OF SIGNING PERICER OR DIRECTOR