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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90018 020 \*\*\*150.00

DOCUMENT #	P97000002312
1. Corporation Name	

MORTGAGEWORKS, INC.

Principal Place of Business  7442 N TAMIAMI TRAIL STE A SARASOTA FL 34243 US  2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State  7442 N TAMIAMI TRAIL STE A SARASOTA FL 34243 US  DO NOT WRITE IN THIS SPACE  3. Date In:orporated or Qualifed 01/09/1997  4. FEI Number 65-07 17361 Not Apt. # Fee Require  5. Certificate of Status Desired Fee Require  6. Election Campaign Financing Trust Fund Contribution Added to Fee	oplicable itional
STE A   SARASOTA FL 34243   DO NOT WRITE IN THIS SPACE	oplicable itional
SARASOTA FL 34243   DO NOT WRITE IN THIS SPACE	oplicable itional
US  3. Date In:orporated or Qualifed 01/09/1997  2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0717361 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Require City & State City & State  6. Election Campaign Financing Sharks Appled Not. Appled Fee Require Fee Require Status Desired Fee Require Status Desired Status Desired Fee Require Status Desired Status Desired Fee Require	oplicable itional
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied	oplicable itional
26   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   S. Certificate of Status Desired   Sea Require	oplicable itional
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Suite, Apt. #, etc.  5. Certificate of Status Desired  Fee Require  6. Election Campaign Financing  \$5.00 N ay	itional
22 5. Certificate of Status Desired Fee Require  City & State 6. Election Campaign Financing \$5.00 N ay	
City & State City & State 6. Election Campaign Financing \$5.00 N ay	
Zip Country Zip Country 8. This corporation owes the current year Intangible	
D. This de potential of the state of the sta	No
24   25   29   30   Personal Property Tax. The second Property Tax.  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent	
81 Name	
WILLIARD JOSIAH J.IV	
7442 N TAMIAMI TRAIL  82 Street Address (P.O. Box Number is Not Acceptable)	
STE A	
SARASOTA FL 34243	
L Set City 185 Zin Code	e
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 regis	
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOT:: Registered Agent signature required when reinstating)  DATE	
· · · · · · · · · · · · · · · · · · ·	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF S  TITLE D DELETE 1.1 TITLE Change	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS.  TITLE D DELETE 1.1 TITLE  NAME WILLARD, JOSIAH J IV  STREET ADDRESS 8012 ESTATES DRIVE  1.3 STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS.  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS  TITLE  D  NAME  WILLARD, JOSIAH J IV  STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL 34243  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS  1.1 TITLE  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  1.4 CITY-ST-ZIP	
12. OFFICERS AND DIRECTORS  TITLE  NAME  WILLARD, JOSIAH J IV  STREET ADDRESS  CITY-ST-ZIP  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF S  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  Change  Change  Change  Change	Addition
12. OFFICERS AND DIRECTORS  TITLE  D  WILLARD, JOSIAH J IV  STREET ADDRESS  CITY-ST-ZIP  TITLE  D  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  TITLE  DELETE  2.1 TITLE  Change	Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP TITLE SARASOTA FL 34243  DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS SARASOTA FL 34243  1.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS	Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS SARASOTA FL 34243  TITLE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP CHANGE STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  CHANGE 22 NAME 23 STREET ADDRESS CITY-ST-ZIP 2.1 CTTLE CHANGE CHANG	Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS STREET ADDRES	☐ Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE D DELETE	☐ Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Addition Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Addition
TITLE D DELETE 1.1 TITLE NAME WILLARD, JOSIAH J IV STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Addition Addition
12. OFFICERS AND DIRECTORS  TITLE  NAME  NAME  WILLARD, JOSIAH J IV  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  NAME  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  Change  Change  Change	Addition Addition
12. OFFICERS AND DIRECTORS  TITLE  D  D  DELETE  1.1 TITLE  NAME  WILLARD, JOSIAH J IV  STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL 34243  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  AL TITLE  Change  Change  Change  Change  Change  Change  Change  Change  Change  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  AL TITL	Addition Addition
12. OFFICERS AND DIRECTORS  TITLE  D  WILLARD, JOSIAH J IV  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  AND Change  Cha	Addition Addition
12. OFFICERS AND DIRECTORS  TITLE  D  WILLARD, JOSIAH J IV  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  DELETE  1.1 TITLE  1.2 TITLE  1.3 STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.2 NAME  3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  1.1 TITLE  1.2 DELETE  3.1 TITLE  3.3 STREET ADDRESS CITY-ST-ZIP  TITLE  1.3 STREET ADDRESS CITY-ST-ZIP  TITLE  1.4 TITLE  1.5 Change  Change  Change  Change  Change  Change  Change  Change  Change  TITLE  1.5 STREET ADDRESS CITY-ST-ZIP  TITLE  1.6 STREET ADDRESS CITY-ST-ZIP  TITLE  1.7 STREET ADDRE	Addition Addition Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (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 eath; 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 changes, or or an attachment with an address, with all other like empowered.

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Josih JW. 11-1 4-22-89

☐ DELETE

Change

☐ Addition

CR2E034 (11/98)