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FILED

Jan 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000003409 (4)

1. Corporation Name

SMITH-PEARSON MORTGAGE, INC.



Principal Place of Business 414 SEYMOUR COURT ORLANDO FL 32765 Oviedo	Mailing Address 414 SEYMOUR COURT ORLANDO FL 32765 Oviedo
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/07/1997

4. FEI Number

59-3420414

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Oviedo, FL

28 Oviedo, FL

24 Zip

25 Country

USA

29 Zip

30 Country

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, JOHN R  
414 SEYMOUR COURT  
ORLANDO FL 32765  
Oviedo;

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C/D ☐ DELETE

NAME John R. Smith  
STREET ADDRESS 414 Seymore Court  
CITY-ST-ZIP Oviedo, FL 32765

TITLE P/D ☐ DELETE

NAME John M. Pearson  
STREET ADDRESS 9905 N.W. 48th Drive  
CITY-ST-ZIP Coral Springs, FL 33076

TITLE V/D ☐ DELETE

NAME Alfred H. Smith III  
STREET ADDRESS 207 Blue Creek Drive  
CITY-ST-ZIP Winter Springs, FL 32708

TITLE S/T ☐ DELETE

NAME Amber L. Smith  
STREET ADDRESS 414 Seymore Court  
CITY-ST-ZIP Oviedo, FL 32765

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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:

ALFRED H. SMITH III 1/14/98 407-671-1668

CR2E034 (10/97)