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

PP:OFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000007483 (5)

PRIMARY MORTGAGE CORP., INC.

Principal Place of Business	Mailing Address
180 SOUTH KNOWLES AVENUE	180 SOUTH KNOWLES AVENUE
SUITE 7	SUITE 7
WINTER PARK FL 32789	WINTER PARK FL 32789

## **FILED** Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1997

200 1	lest Canton Avenue	280 NAST	Canton Ave	enue 50-342800 <b>5</b>	Alex Applies to	
Suite Apt	# ST Canton Avenue	Suite, Apt. #, etc.	Cancon Ave		Not Applicable \$8.75 Additional	
22 Suite	· ·	27 Suite 24	ስ <sup>*</sup>	5. Certificate of Status Desired	Fee Required	
City & Stat		City & State	<u>.                                    </u>	6. Election Campaign Financing	·	
<u> </u>		28 Winter Pa	ark El	Trust Fund Contribution	\$5.00 May Be Added to Fees	
		Zip	Country	8. This corporation owes or has paid the cu		
Zip 32789	) 25 Ú.S.	29 32789	30 Ú.S.	A . Personal Property Tax due June 30.	Yes No	
	g. Name and Address of Current R		.	10. Name and Address of New Registered	Agent	
INFANTINO, THOMAS V 81 Name K. Michael Swann						
	D SOUTH KNOWLES AVENUE			82 Street Address (P.O. Box Number is Not Acceptable)		
	ITE 7		280	West Canton Avenue, Su	ite 240	
1	NTER PARK FL 32789		83			
			24 - 21			
			<b>84</b>   City   M i 7	ter Park, FL	85 Zip Code 32789	
11. Pursuant	to the provisions of Sections 697 0502 ar	nd.607.1508, Florida Stal	utes, the above-named	d corporation submits this statement for the purpose of	of changing its registered	
office or r	egistered agent, or both, in he State of	Florida, Such change wa	s authorized by the cor	d corporation submits this statement for the purpose of reporation's board of directors. I hereby accept the appropriate the submits of the purpose of the submits of the purpose of the p	pointment as registered	
		200, 000,0000,	K.	Michael Swann 1/	27/02	
SIGNATURE	Site of a typed or printed name of regressed agent an	nd tille if applicable. (N	OTE: Registered Agent signatur	a required when reinstating)  DATE	23/98	
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D	DELETE	1.1 TITLE	President-Treasurer/Director	X hange Addition	
NAME	INFANTINO, THOMAS V		1,2 NAME	Murphy, John J. 2105 Howell Branch Road		
STREET ADDRESS	180 SOUTH KNOWLES AVENUE	, SUITE 7	1.3 STREET ADDRESS	2105 Howell Branch Road		
CITY - ST - ZIP	WINTER PARK FL 32789		1.4 CITY-ST-ZIP	Maitland, FL 32751		
TITLE		DELETE	2.1 TITLE	Vice President- Secretary/Director	Change Addition	
NAME [	Į		2.2 NAME	Coley, Richard T. 2105 Howell Branch Road		
STREET ADDRESS			2,3 STREET ADDRESS	2105 Howell Branch Road		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	Maitland, FL 32751		
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS	1		3.3 STREET ADDRESS			
CITY-ST-ZIP	İ		3.4. CITY-ST-ZIP	}		
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5 2 NAME	İ		
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CiTY - ST - ZIP	į .		
TITLE		DELETE	61 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	İ		
	ertify that the information supplied with t	his filing does not qualify		ed in Section 119.07(3)(i), Florida Statutes. I further ca gnature shall have the same legal effect as if made ur	ertify that the information	
indicated officer or of	on this annual report or supplemental an director of the corporation or the receive	nual report is true and a r or trustee empowered t	ocurate and that my sig o execute this report as	gnature shall have the same legal effect as if made ur s required by Chapter 607, Florida Statutes; and that	nder oath; that I am an my name appears in	