

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

FILED
Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000011182 (7)
1. Corporation Name
SOUTHEASTERN STATES MORTGAGE CORPORATION

Principal Place of Business

Mailing Address

5921 NW 74 PL
PARKLAND FL 33067

5921 NW 74 PL
PARKLAND FL 33067



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26 212 NW 4TH Ave		02/04/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27 Boca Raton		65-0725562	
City & State		City & State		Applied For	
23		28 Boca Raton FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29 33432		30 PB	
Country		Country		8.75 Additional Fee Required	
25		29		6. Election Campaign Financing	
25		29		Trust Fund Contribution	
25		29		7. This corporation owes or has paid the current year Intangible	
25		29		Personal Property Tax due June 30.	
25		29		8. Yes No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FORMAN, ROBERT S
2101 W. COMMERCIAL BLVD., STE. 4100
FT. LAUDERDALE FL 33309

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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

Robert S. Richardson

3/25/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Change Addition
NAME	TOMLINSON, HAROLD L	1.2 NAME	
STREET ADDRESS	5921 NW 74 PL.	1.3 STREET ADDRESS	
CITY - ST - ZIP	PARKLAND FL 33067	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	Change Addition
NAME	RICHARDSON, BART	2.2 NAME	
STREET ADDRESS	5921 NW 74 PL.	2.3 STREET ADDRESS	
CITY - ST - ZIP	PARKLAND FL 33067	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: B. Richardson

CR2E034 (10/97)