


FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State
1998		DIVISION OF CORPORATIONS

DOCUMENT # P97000014036 (2)
1. Corporation Name
MORTGAGE ACCEPTANCE CORPORATION



3. Date Incorporated or Qualified 02/13/1997	
4. FEI Number 59-3431169	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21		2b	P.O. Box 54074
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	Jacksonville, FL
Zip	Country	Zip	Country
24	25	29	30
		32245	DUVAL

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		81	Name <i>P. R. Crabtree, Attorney</i>		
		82	Street Address (P.O. Box Number is Not Acceptable) <i>8375 Dixie Trail, Suite 401</i>		
		83			
		84	City <i>Jacksonville</i>	FL	85

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 607.0506, Florida Statutes.

SIGNATURE R. R. Crabtree, Attorney 3/12/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D ASHTON, JEFFREY T	1.2 NAME	D, P.T. JEFFREY J. ASHTON
STREET ADDRESS	4131 SOUTHSIDE BLVD. #108	1.3 STREET ADDRESS	4131 Southside Blvd #108
CITY-ST-ZIP	JACKSONVILLE FL 32218	1.4 CITY-ST-ZIP	Jacksonville, FL 32218
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	BRAD Justice
STREET ADDRESS		2.3 STREET ADDRESS	431 Southside Blvd #108
CITY-ST-ZIP		2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	M. STEVEN Cropper
STREET ADDRESS		3.3 STREET ADDRESS	4131 Southside Blvd #108
CITY-ST-ZIP		3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	MELISSA A. ASHTON
STREET ADDRESS		4.3 STREET ADDRESS	4131 Southside Blvd #108
CITY-ST-ZIP		4.4 CITY-ST-ZIP	JACKSONVILLE, FL 32218
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

CR2E034 (10/97)