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FLORIDA DIVISION OF CORPORATIONS
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(H97000010783-3)

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4000

FROM: FOLEY & LARDNER

CONTACT: ~~KAREN PETERSON~~ Sonya Sowards

PHONE: (904)359-2000

ACCT#: 072720000061

FAX #: (904)359-8700

NAME: AMERICAN MORTGAGE REDUCTION, INC.

AUDIT NUMBER.....H97000010783

DOC TYPE.....REGISTERED AGENT CHANGE

CERT. OF STATUS..0

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DIVISION OF CORPORATIONS

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FAX AUDIT NO. H97000010783**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT
OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1a. The name of the corporation is: American Mortgage Reduction, Inc.
- 1b. The mailing address of the corporation is: 1653 Fairway, Suite 209, Jenkintown, PA 19046.

1c. Date of incorporation: 2/14/97

Document number H97000014713

2. The name and address of the current registered agent and office is:

F&L Corp., 200 Laura Street, Jacksonville, Florida 32202

3. The name and address of the new registered agent and office is: CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Date: May 30, 1997

SIGNATURE: 

(Officer, Chairman or Vice Chairman of the Board)

Laurie S. Wockenfuss, Vice President/Secretary

(Typed or printed name and title)

Having been named as registered agent and to accept service of process for the above-stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Date: May 30, 1997

SIGNATURE: 

(Registered Agent)

BARBARA A. BORNE
SPECIAL ASSISTANT SECRETARY

(Typed or printed name and title)

Prepared by:
Charles V. Hedrick, Esquire
Fla. Bar No. 0284130
200 Laura Street, Post Office Box 240
Jacksonville, Florida 32201-0240

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