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FILED
May 19 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 # P97000023327 (4)

1. Corporation Name

DEVINE MORTGAGE BROKERS, INC.

Principal Place of Business

Mailing Address

5099 N A1A
SUITE C
VERO BEACH FL 32963

5099 N A1A
SUITE C
VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

21 Suite E

2a. Mailing Address

26 Suite E

Suite Apt. #, etc.

Suite, Apt. #, etc.

22 65 Royal Palm Pointe

27 65 Royal Palm Pointe

City & State

City & State

23 Vero Beach, Florida

28 Vero Beach, Florida

24 Zip 32960

Country

25 Ind. River

29 Zip 32960

Country

30 Indian River

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEVINE, ANN S
5099 N A1A
SUITE C
VERO BEACH FL 32963

81 Name

Ann S.

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

65 Royal Palm Pointe Suite E

83

Vero Beach

84 City

FL 85 32960

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME DEVINE, JAMES A
STREET ADDRESS 5099 N A1A, STE C
CITY-ST-ZIP VERO BEACH FL 32963

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 65 Royal Palm Pointe, Suite E.
1.4 CITY-ST-ZIP Vero Beach, Florida 32960

TITLE D ☐ DELETE
NAME DEVINE, ANN S
STREET ADDRESS 5099 N A1A, STE C
CITY-ST-ZIP VERO BEACH FL 32963

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 65 Royal Palm Pointe, Suite E.
2.4 CITY-ST-ZIP Vero Beach, Florida 32960

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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

ANN S. Devine

4/22/98 51 7787095

CP2E034 (10/97)