

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

FILED
May 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000031506 (3)**
1. Corporation Name
MUTUAL REALTY AND MORTGAGE COMPANY, INC.



Principal Place of Business 529 BURNT TREE LANE APOPKA FL 32712	Mailing Address 529 BURNT TREE LANE APOPKA FL 32712
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 P.O. Box 1443 Suite, Apt. #, etc. 22		2a. Mailing Address 26 P.O. Box 1443 Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 04/07/1997	
23 ORLANDO, FL. City & State 24 32802 25 U.S. Zip Country		28 ORLANDO, FL. City & State 29 32802 30 U.S. Zip Country		4. FEI Number 59-3436705 Applied For 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SALZMAN, GARY S
1031 W MORSE BLVD STE 105
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 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 _____ (NOTE: Registered Agent signature required when re-instating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOXEY, ANDREW G	1.2 NAME	ANDREW G. TOXEY
STREET ADDRESS	529 BURNT TREE LANE	1.3 STREET ADDRESS	P.O. Box 1443 N/A
CITY-ST-ZIP	APOPKA FL 32712	1.4 CITY-ST-ZIP	ORLANDO, FL. 32802
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOXEY, STACEY M	2.2 NAME	STACEY M. TOXEY
STREET ADDRESS	529 BURNT TREE LANE	2.3 STREET ADDRESS	P.O. Box 1443 N/A
CITY-ST-ZIP	APOPKA FL 32712	2.4 CITY-ST-ZIP	ORLANDO, FL. 32802
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
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.

SIGNATURE **(ANDREW G. TOXEY)** **4/6/98** **(407)**

CR2E034 (10/97)