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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000043050 (8) **DOCUMENT #**

Principal Place of Business	Mailing Address
5551 RIDGEWOOD DRIVE SUITE 203 NAPLES FL 34108	5551 RIDGEWOOD DRIVE SUITE 203 NAPLES FL 34108
6 Dinainal Place of Puninger	Se Molling Address

FILED Apr 16 1998 8:00am Secretary of State

SIGNATURE MORTGAGE CAPITAL, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/14/1997 Applied For 21 Not Applicable 26 Suite, Apt. #, otc Suite, Apt. #, etc \$8.75 Additional X Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible X Yes 24 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name 5551 RIDGEWOOD DRIVE SUITE 203 R2 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34108 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 little if applicable (NOTE: Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE TITLE Change Addition GRIFFIN. GERALD F NAME 1.2 NAME 5551 RIDGEWOOD DRIVE SUITE 203 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE D۷ CORACE, RICHARD F 2.2 NAME NAME 5551 RIDGEWOOD DRIVE SUITE 203 STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 34108 CITY-ST-2IP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE DP 3.1 TITLE NAME CIOFFI. CHRIS 3.2 NAME 5551 RIDGEWOOD DRIVE SUITE 203 STREET ADDRESS 3.3 STREET ADDRESS NAPLES FL 34108 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE GRIFFIN, GERALD F II 4. 2 NAME NAME 5551 RIDGEWOOD DRIVE SUITE 203 4.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE SHARPE, KEITH A NAME 5.2 NAME 5551 RIDGEWOOD DRIVE SUITE 203 STREET ADDRESS 5.3 STREET ADDRESS NAPLES FL 34108 CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information indicated on this annual report of officer or director of the corporation Block 12 or Block 13 if change in the corporation of the corporation between the corporation because the corporation of the c does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information out is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

941-566-2800

CR2E034