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FILED  
Mar 11 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 # P97000047487 (8)

1. Corporation Name

EXPRESS MORTGAGE SERVICES OF ORLANDO, INC.

Principal Place of Business

1025 S. SEMORAN BLVD., STE. 1093  
WINTER PARK FL 32792

Mailing Address

1025 S. SEMORAN BLVD., STE. 1093  
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1997

2. Principal Place of Business

2a. Mailing Address

21 11867 E. Colonial Drive

25 Suite, Apt. #, etc.

22 City & State  
Orlando FL 32

27 City & State

24 Zip 32826

25 Country Orange

29 Zip

30 Country

4. FEI Number

59-3449586

Applied For

Not Applicable

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

HUNCHUCK, DENNIS  
1025 S. SEMORAN BLVD., STE. 1093  
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

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

11867 East Colonial Drive

83

Orlando

84 City

FL

85

Zip Code 32826

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/2/98

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HUNCHUCK, DENNIS  
STREET ADDRESS 425 BLUE JAY WAY  
CITY-ST-ZIP ORLANDO FL 32828

TITLE D ☐ DELETE

NAME HUNCHUCK, PAMELA J  
STREET ADDRESS 425 BLUE JAY WAY  
CITY-ST-ZIP ORLANDO FL 32828

TITLE D ☐ DELETE

NAME LAICH, MELVIN  
STREET ADDRESS 3638 GLENCAIRN ST.  
CITY-ST-ZIP SHAKER HEIGHTS OH 44122

TITLE D ☐ DELETE

NAME NOVAK, KIM  
STREET ADDRESS 5414 OAKRIDGE ST.  
CITY-ST-ZIP WILLOUGHBY OH 44094

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Laich melvin  
19432 Whinslow  
Shaker Heights, Ohio 44122

200002453802

-03/11/98--01024--012

\*\*\*150.00

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:



2/2/98

(407) 322-2400

CR2E034 (10/97)