

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 31, 1999 8:00 am
Secretary of State

03-31-1999 90021 038 ***150.00

DOCUMENT # **P97000091428**

1. Corporation Name

RESIDENTIAL MORTGAGE CORPORATION (IMC), INC.

Principal Place of Business

**100 MIDWAY ROAD
SUITE 21
CRANSTON RI 02920
US**

Mailing Address

**5901 EAST FOWLER AVENUE
TAMPA FL 33617-2362
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1997

4. FEI Number

58-2350618

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 the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip **30** Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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. *** Please see attached Annex A for a complete**

list of Officers & Directors.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **STRUCK, HARRY C**
STREET ADDRESS **100 MIDWAY ROAD, SUITE 21**
CITY-ST-ZIP **CRANSTON RI 02920**

TITLE **DV** ☐ DELETE

NAME **NICHOLAS, GEORGE**
STREET ADDRESS **5901 EAST FOWLER AVENUE**
CITY-ST-ZIP **TAMPA FL 33617-2362**

TITLE **CV** ☐ DELETE

NAME **MIDDLETON, THOMAS G**
STREET ADDRESS **5901 EAST FOWLER AVENUE**
CITY-ST-ZIP **TAMPA FL 33617-2362**

TITLE **VS** ☐ DELETE

NAME **WILLIAMS, LAURIE S**
STREET ADDRESS **5901 E. FOWLER AVENUE**
CITY-ST-ZIP **TAMPA FL 33617-2362**

TITLE **V** ☐ DELETE

NAME **MCCARTHY, SUSAN W**
STREET ADDRESS **1301 VIRGINIA DRIVE, SUITE 110**
CITY-ST-ZIP **FT. WASHINGTON PA 19034**

TITLE **DT** ☐ DELETE

NAME **MARVIN, STUART D**
STREET ADDRESS **5901 FOWLER AVENUE**
CITY-ST-ZIP **TAMPA FL 33617-2362**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Laurie S. Williams, Vice President, 3/17/99, (813) 984-

Date

Daytime Phone #

8801

CR2E034 (11/98)

Annex A

Company Officer	Title	Title	Business Address
Residential Mortgage Corporation (IMC) Inc.			
Harry C. Struck	Director	President	100 Midway Road, Suite 21, Cranston, RI 02920
Thomas G. Middleton	Chairman of the Board	Vice President	5901 East Fowler Ave., Tampa, FL 33617-2362
George Nicholas	Director	Vice President	5901 East Fowler Ave., Tampa, FL 33617-2362
Stuart D. Marvin	Director	Treasurer	5901 East Fowler Ave., Tampa, FL 33617-2362
Laurie S. Williams	Vice President	Secretary	5901 East Fowler Ave., Tampa, FL 33617-2362
Susan W. McCarthy	Vice President		1301 Virginia Drive, Suite 110, Ft. Washington, PA 19034
Vincent Spingola	Assistant Secretary		49 Brandt Avenue, Suite 4, Clark, NJ 07066

275615-90021-38
097000091428