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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000094062 (1)

## **FILED** Apr 17 1998 8:00am Secretary of State

SHEARER MORTGAGE & INVESTMENT GROUP, INC. Principal Place of Business Mailing Address 3886 ZION ROAD 3886 ZION ROAD JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/03/1997 2, Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Efection Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Ζıp Country This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHEARER, STEPHEN A 1210 SEABREEZE AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE BEACH FL 32250 83 84 City 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 prefind name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change 71TLF 1 1 TITLE SHEARER, STEPHEN A NAME 1.2 NAME 1210 SEABREEZE AVENUE 1.3 STREET ADDRESS STREET ADORESS JACKSONVILLE BEACH FL 32250 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE SHEARER, PATRICIA J NAME 2.2 NAME 118 28TH AVENUE SOUTH 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE BEACH FL 32250 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TIFLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDIRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP THILE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Addition TITLE DELETE 6 1 TIFLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

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

SIGNATURE:

STEPHEN A SHEARER 4/14

CR2E034