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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000103128 (9)

ANCO MORTGAGE SERVICES INC.

FILED Feb 12 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Addre	288			· ·			
3600 S. STATE RD. 7 STE. #1 MIRAMAR FL 33023		3600 S. STATE RD. 7 STE. #1 MIRAMAR FL 33023							
MIKAMAK PL	33023	MIDAMADIC	33023			DO NOT WRITE	IN THIS SE	PACE	
						3. Date Incorporated or Qualified			
						12/05/1997			
2. Principal Pla	ace of Business	2a. Mailing Ac	ddress			4. FEI Number		Ār	oplied For
	S. STATE ROAD 7	26				65-0800596		No	ot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.				(X)	\$8.75	Additional	
22 SUITE # 327		27			5. Certificate of Status Desired	וצט	Fee Re	equired	
City & State		City & Star	te			6. Election Campaign Financing	*****	\$5.00	May Be
	AR FLORIDA	28				Trust Fund Contribution			to Fees
Zip	Country	Zip	T	Country		8. This corporation owes or has pa	id the curre	ent year Int	tangible
33023	25 BROWARD	29	13	30		Personal Property Tax due June			[] No
24 >>0=>	9. Name and Address of Currer	1	A			10. Name and Address of New Re		gent	
60	RING, CARLTON M			81	Name				
	O S. STATE RD. 7 STE. #1					the second second	-1-1		
	AMAR FL 33023			82	Street Ac	ddress (P.O. Box Number is Not Acceptat) (0)		
·	DAMAN I E 00020			83					
				84	City		FL	85 Zip	Code
								1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	to realistated
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, FI • of Florida, Such cl	orida Statutes	s, the above athorized by	e-named co the corno	orporation submits this statement for the paration's board of directors. I hereby acces	of the appo	untment as	registered
agent I ar	m familiar with, and accept the oblig	pations of, Section 6	07.0505, Flor	ida Statutes	3.	orporation submits this statement for the pration's board of directors. I hereby acceptation			_
SIGNATURE: .									
Olorwitoria: ,	Signature, typind or (4mb d name of registered ag		(NOTE		int signatura re	quired when reinstaling)	DATE		
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	L	DELETE	1.1 TITLE			ŧ	Change	Addition
NAME	GORING, CARLTON M			1.2 NAME					
STREET ADDRESS	3600 S. STATE RD. 7 STE. 4	#1		1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIRAMAR FL 33023			1.4 CHTY - S	T-21P				
TITLE			DELETE	2.1 TITLE				Change	☐ Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS		100		
City-ST-ZiP				2. 4 CITY-					
TITLE			DECETE	31 TITLE	31-211			Change	Addition
			, DEVIVE	32 NAME					
NAME									
STREET ADDRESS				3 3 STREET					
CITY-ST-ZIP			T nevere	3.4. CITY-	ST-ZIP			Change	Addition
TITLE		L	DELETE	4.1 TITLE	ļ		·	crange	- Addition
NAME				4. 2 NAMÉ]				
STREET ADDRESS				4.3 STREET	ADDRESS				•
CITY-ST-ZIP				4.4 CITY - S	IT-ZIP				
TITLE			DELETE	5.1 TITLE			Ţ	Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY - 5					
TITLE		·	DELETE	6.1 TITLE	/1 411			Change	Addition
1		L	, withit						
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET					
CITY-ST-ZIP				6.4 CITY-5	ST - ZIP				

14. Thereby 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 informatio 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 of 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.

02/03/98