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

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 99 JUN 10 PH 2:01 DIVISION OF CORPORATIONS 1999 DOCUMENT # P98000029457 SECLETARY OF STATE TALLAHASSEE, FLORIDA MORTGAGE LOAN CORPORATION 41 BERTY Principal Place of Business Mailing Address P.O. BOX 361 5231.5 S.R. 674 DO NOT WRITE IN THIS SPACE BRANDON, FL WINAUMA, FL 3. Date incorporated or Qualifed 3359B 33509 MARCI 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business <u> 59-35025</u> Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 28 Country Zip Country B. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LANCE C. BALL Street Address (P.O. Box Number is Not Acceptable) S.R. 674 5231.5 83 WIMAUMA, 85 Zip Code 33598 84 City and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered his of, Section 607.0505, Florida Statutes. Pursuant to the provisions of Sections 607.0502 and 607 office or registered agent, or both, in the State of Florida. agent. I am familiar with and accept the organic has of, S CHNER SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE NCE C. BALL 12 NAME NAME 400002905734--S.R. 674 1.3 STREET ADDRESS -06/15/99--01095--021 STREET ADDRESS 1.4 City - ST-2IP CITY-ST-ZIP ****150.00 - ****150.00 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 3.4. OTTY-ST-ZIP ☐ Addition DELETE 4.1 TITLE ☐ Change TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 51 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

8.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

□ DELETE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

14. 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 are officer or director of the corporation or the receiver or trustee empoyered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears Block 12 or Block 13 if changed, or on an attachment with an appears of the empowered.

☐ Change

Addition

Post Office Box 361 Brandon, FL 33509

May 31, 1999

Annual Report Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Annual Report Filing for Liberty Mortgage Loan Corporation

Please be advised, that I did not receive a preprinted annual report form in January. As such, please excuse the filing deadline and accept the attached annual report form, which I recently requested and have diligently completed and returned within a reasonable period of time. Additionally, please find enclosed check number 1142 in the amount of one hundred fifty dollars (\$150.00) for the filing fee.

Please note, I would be interested in receiving information on the proper procedures for changing the status of the corporation to inactive.

Thank you for your time and consideration.

Sincerely,

Lance C. Ball