PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000058994

1. Corporation Name

BURNETT MORTGAGE INCORPORATED

Principal Place of Business

Mailing Address

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90194 049 ***150.00



12321 TIGER CREEK LANE 12321 TIGEF: CREEK LANE JACKSONVILLE FL 32225 JACKSONVILLE FL 32225 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/01/1998 Mailing Address FEI Number Applied For 2. Principal Place of Business 2a. FHBATIC Blud. 9051 Atlantic Blva 9951 Not Applicable 26 **\$8.75** A ditional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifc ate of Status Desired \Box Fee Required Suite 22 Duite_ 27 City & State \$5.00 May Be City & State Election Campaign Financing onville Trust Fund Contribution Added to Fees 28 23 This corporation owes the current year intangible Courtn Duva Persor at Property Tax. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BURNETT, EARL F Street Acdress (P.O. Box Number is Not Acceptable) 82 12321 TIGER CREEK LANE JACKSONVILLE FL 32225 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sc ctions 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. pent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR'S IN 12 13 12. Change ☐ Addition DELETE 1.1 TITLE TITLE 12 NAME BURNETT, EARL 9 NAME 12321 TIGER CREEK LANE 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32225 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE TITLE 2.1 TITLE BURNETT, MARISSA J 2.2 NAME NAME 12321 TIGER CREEK LANE 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32225 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1 TITLE TILE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Cha ☐ Addition 6.1 TITLE ☐ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereb / 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 carried 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 undofficer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that

SIGNATURE:

CITY-ST-ZIP

64 CITY-ST-ZIP

CR2E034 (11/98)