

Document Number Only

P980000069199

C T Corporation System.

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

100002632811--1  
-09/04/98--01035--024  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

RA

Change

First Colonial Mortgage (me), Inc.

FILED  
98 SEP -4 PM 2:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Profit                        | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merge                     |
| <input type="checkbox"/> NonProfit                     |   |  |
| <input type="checkbox"/> Limited Liability Company     | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                      |
| <input type="checkbox"/> Foreign                       |   |  |
| <input type="checkbox"/> Limited Partnership           | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                     |
| <input type="checkbox"/> Reinstatement                 | <input type="checkbox"/> Reservation            | <input checked="" type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Limited Liability Partnership |   | <input type="checkbox"/> Fictitious Name           |
| <input type="checkbox"/> Certified Copy                | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                       |
| <input type="checkbox"/> Call When Ready               | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30                |
| <input checked="" type="checkbox"/> Walk In            | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up        |
| <input type="checkbox"/> Mail Out                      |   |  |

Name	9/8/98
Availability	
Document Examiner	Don
Updater	Don
Verifier	Don
Acknowledgment	Don
W.P. Verifier	Don

9/4/98

PLEASE RETURN EXTRA COPY(S)  
FILE STAMPED  
THANKS  
JOEY

RECEIVED  
98 SEP -4 PM 2:03  
DIVISION OF CORPORATION

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT  
OR BOTH FOR CORPORATIONS**

*Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

- 1a. The name of the corporation is: FIRST COLONIAL MORTGAGE (IMC), INC.
- 1b. The mailing address of the corporation is: 5901 EAST FOWLER AVENUE, TAMPA, FL 33617-2362
- 1c. Date of incorporation: AUGUST 7, 1998 Document number: P980000691
2. The name and address of the current registered agent and office are:

F&L Corp.  
200 Laura Street  
Jacksonville, Florida 32202

3. The name and address of the new registered agent and office are: CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Date: August 20, 1998

SIGNATURE: 

(Officer, Chairman or Vice Chairman of the Board)

Thomas G. Middleton, Vice President

(Typed or printed name and title)

*Having been named as registered agent and to accept service of process for the above-stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

Date: August   , 1998

SIGNATURE: 

(Registered Agent)

**BARBARA A. BURKE  
SPECIAL ASSISTANT SECRETARY**

(Typed or printed name and title)

**FILED**  
**98 SEP -4 PM 2:42**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**