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**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # P98000092620

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Mar 02, 1999 8:00 am **Secretary of State**

03-02-1999 90198 034 \*\*\*150.00

## 

1. Corporation Name	
DOLPHIN MORTGAGE EXPRESS, INC.	ļ
	\$880;640; 1909; 1800; 1804 <b>18</b> 05)

Mailing Address Principal Place of Business 7700 SEMINOLE BLVD. STE.1. 7700 SEMINOLE BLVD..STE.1 SEMINOLE FL 33772 SEMINOLE FL 33772 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/30/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 14581 WALSING HAM RD 26 14581 WALSINGHAM \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing \_ARGO ARGO Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intangible 30 Pinellas Pinellas **⊠**No Personal Property Tax. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AND ACE GIFFIN, DONALD W Street Address (P.O. Box Number is Not Acceptable) 82 7700 SEMINOLE BLVD., STE.1 SEMINOLE FL 33772 83 WALSING HAM City 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. ala ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. President / Director Change DELETE 1,1 TITLE TITLE CANDACE GIFFIN, DONALD W P.A. 1.2 NAME NAME 14581 Walsing Ham RD 7700 SEMINOLE BLVD., STE.1 1.3 STREET ADDRESS STREET ADDRESS 33774 LARGO, FI SEMINOLE FL 33772 1.4 CITY-ST-ZIP CITY-ST-ZIP Director Change Addition vice Président/ ☐ DELETE 2.1 TITLE TITLE Secretary 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY- ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE ☐ Change S1TIDE TITLE 5.2 NAME

CITY-ST-ZIP 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

andoux. Valorico

□ DELETE

Change

☐ Addition

CR2E034 (11/98)