FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S63841** **(8)**

1. Corporation Name

MORTGAGE EXPERTS, INC.

Principal Place of Business	Mailing Address
6801 LAKE WORTH RD. 114 LAKE WORTH FL 33467 US	6801 LAKE WORTH RD. 114 LAKE WORTH FL 33467 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/03/1991
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 65-0273500 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for a tangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HERMAN, KENNETH C. 6801 LAKE WORTH RD. #114 LAKE WORTH FL 33467	81 Name: WILLIAM C. PETTERUTO 82 Street Address (P.O. Box Number is Not Acceptable): 6801 LAKE WORTH ROAD, SUITE 114 83 84 City: LAKE WORTH FL 85 Zip Code: 33467

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.

SIGNATURE: William C. Petteruto, WILLIAM C. PETTERUTO, PRESIDENT 5/1/95
(Signature, typed or printed name of registered agent and date if not current) (DATE: Registered Agent signature required when reinstated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☒ Change ☐ Addition
NAME	HERMAN, KENNETH C.	12 NAME	NO LONGER A DIRECTOR OR OFFICER
STREET ADDRESS	13716 YARMOUNT DR APT C	13 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH. FL	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	PETTERUTO, WILLIAM C.	22 NAME	
STREET ADDRESS	14 VELAIRE DR.	23 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BCH. FL	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	REMITTED BY MAY 1
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: William C. Petteruto, WILLIAM C PETTERUTO 4/29/95 (407)434-9557
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date (Daytime Phone #)

0272440 CP