FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # \$64769

(0)

Corporation Name GIBSON MORTGAGE GROUP, INC. Principal Place of Business Mailing Address							
Principal Place of 2281 LEE RI SUITE 102 WINTER PAR)	Maing Address 2281 LEE RD SUITE 102 WINTER PARK FL 32789					
WINIER PAP	IR FL 32703	WINTER FARK FL S	2703		Date Incorporated or Qualified 07/02/1991	3a. Date of La 04/2	st Report 4/1995
, Principal Place of Business		2a. Mailing Address				Applied For	
1		26			59-3079941 Not Ap		Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	1 1 7 1	Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	3 (5.00 May Be
Zip	Country	28	Country		This corporation has liability for		
]	25	29	30			Mo No	5. 5 . 66.662,
	9. Name and Address of Curre				10. Name and Address of New R	egistered Agent	(
			81	Name			
GIBSON 2281 LE	i, Harry L. Er Ro		82	Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
SUITE 1			83	•			
	102 1 PARK FL 32789			C:		1	Zin Coda
			6-4	City		FL 85	Zip Code
2.		ND DIRECTORS	13.	sagnitulfrater telup ofer	d when reinstating: ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRE	
TLF AME	D Gibson, Harry L	DELETE	1 1 THU: 12 NAN E				igeAdd tion
THEFT ADDRESS	2281 LEE RD #102		3 STR- [] A	DORESS			
TY - ST - ZiP	WINTER PARK FL		1.4 CITY - ST				
TLE		☐ DELETE	2 1 T TL ±			☐ Cha	inge Addition
AME			2.2 NAN E				
FREET ADDRESS			23 STR ET A	DDRESS			
TY-ST-ZIP		☐ DELFTE	24 C-TY -ST 3 1 H/L	- Z.P		Cha	inge Addition
INE		[] bett 16	3 2 NAM :			LI 0116	[_] 1.00/110°
TREET ADORESS			33 SIFEET	ADDRESS			
TY-ST-ZIP			3.4 CiTV - ST	ŀ			
TLE		☐ DELETE	4 1 TIT E			Cha	ange 🔲 Addit or
AME			4.2 NA1. E				
FREET ADDRESS			4.3 S1R E1 A	DOPESS			
TY-ST-ZiP			4 4 CIT' - ST	- ZIP			
TLE		☐ DETE1E	5 1 TIT E			☐ Cha	ange 🔲 Addition
AME			52 NAME	DOUGE			
REET ADDRESS			53 STR ELA 54 CHY - ST				
TY-ST-ZIP TLE		DELETE	6 1 Til E	- 415		Cha	ange 🔲 Addition
AME		<u></u>	6.2 NAME				
TREET ADDRESS			63 SIR EF A	ODRESS			
ITY-ST ZIP			6.4 CIT1 - S!	-ZP			
4. I do hereby	certify that the information supplied	f with this fling is voluntarily fur	nished and dives	not qualify to	for the exemption stated in Section 119	.07(3)(k), Florida S -same legal effect	Statutes. I further as if made unde
certify that oath; that the appears in	me information indicated on this an am an officer or director of the corp Block 12 or Block 13 if changed, o	nua-report or supplemental an borahony the retribler of trusti con an extagnment with an add	nua report is true ee empowered to bress	execute th	ate and that my signature shall have the is report as required by Chapter 607, F	orida Statutes; ar	id that my na

SIGNATURE:

NATURE AND TYPED OR IRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96

407-647-3433

aytin e Phone 🔻