FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # S68292 (9)

1. Corporation Name

STOLTZ MORTGAGE COMPANY OF FLORIDA, INC.

Principal Place of Business

SUITE 4199
301 YAMATO ROAD
BOCA RATON FL 33431

Mailing Address

SUITE 4199
301 YAMATO ROAD
BOCA RATON FL 33431

3. Date Incorporated or Qualified: 07/24/1991

3a. Date of Last Report: 08/11/1995

4. FEI Number: 65-0286818 ☐ 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 intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 7000 W.PALMETTO PK.RD.	26 7000 W.PALMETTO PK.RD.
Suite, Apt. #, etc. 22 212	Suite, Apt. #, etc. 27 212
City & State 23 BOCA RATON,FL.	City & State 28 BOCA RATON,FL.
Zip 24 33433 / Country 25 PALM BEACH	Zip 29 33433 / Country 30 PALM BEACH

9. Name and Address of Current Registered Agent

MORRIS L STOLTZ II
301 YAMATO RD. SUITE 4199
BOCA RATON, FL. 33437

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ____________ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STOLTZ, MORRIS L., II	1.2 NAME	
STREET ADDRESS	301 YAMATO RD. #4199	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MITCHELL, ROBERT	2.2 NAME	
STREET ADDRESS	301 YAMATO RD. #4199	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	DV ☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	STOLTZ, JACK	3.2 NAME	
STREET ADDRESS	301 YAMATO RD. #4199	3.3 STREET ADDRESS	DELETE
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	SV ☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	STOLTZ, RANDY M.	4.2 NAME	
STREET ADDRESS	301 YAMATO RD. #4199	4.3 STREET ADDRESS	DELETE
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	300001817453
TITLE	☐ DELETE	6.1 TITLE	-05/13/96--01009--018 ☐ Change ☐ Addition
NAME		6.2 NAME	***200.00
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(k), 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: Morris L. Stoltz II
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96 Date

407 250-6707 Daytime Phone #

SG 5-1-96

CR2E034 (12/95)