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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 17 PM 3:29

DOCUMENT # V72610

(1)

1. Corporation Name

ACCREDITED MORTGAGE, INC.

Principal Place of Business

1576 TWELVE OAKS CIR
KISSIMMEE FL 34744

Mailing Address

1576 TWELVE OAKS CIR
KISSIMMEE FL 34744

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/15/1992

3a. Date of Last Report

02/03/1994

4. FEI Number

59-3145007

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

21 705 E Oak St ~~XXX~~ E

2a. Mailing Address

26 705 E Oak St ~~XXX~~ E

Suite, Apt. #, etc.

22 Suite E

Suite, Apt. #, etc.

27 Suite E

City & State

23 Kissimmee, Florida

City & State

28 Kissimmee, Florida

Zip

24 34744

Country

25 Osceola

Zip

29 34744

Country

30 Osceola

9. Name and Address of Current Registered Agent

WHITSTON, JOYCE A.
1576 TWELVE OAKS CIR
KISSIMMEE FL 34744

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

(Signature, typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME WHITSTON, JOYCE A.
STREET ADDRESS 1576 TWELVE OAKS CIR
CITY-ST-ZIP KISSIMMEE FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE D
NAME WHITSTON, C. ALLEN
STREET ADDRESS 1576 TWELVE OAKS CIR
CITY-ST-ZIP KISSIMMEE FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE S
NAME BLACKSTONE, SUSAN
STREET ADDRESS 610 OLEANDER LANE
CITY-ST-ZIP KISSIMMEE FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Joyce Whitston
Joyce Whitston/President

2/13/95

407/931-1333