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Feb 27 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 727253 (7)  
1. Corporation Name  
NATIONAL ASSOCIATION OF MORTGAGE BROKERS, INC.



Principal Place of Business Mailing Address  
8201 GREENSBORO DR. SUITE 300 MACLEAN VA 22102 US

3. Date Incorporated or Qualified 08/23/1973  
3a. Date of Last Report 07/26/1996

2. Principal Place of Business 21  
2a. Mailing Address 26  
4. FEI Number 59-1673989 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  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

9. Name and Address of Current Registered Agent  
TOMKO, STEVEN R JR  
1836 LAKEVIEW RD  
CLEARWATER FL 34624  
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 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office and 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D MCGILL, PATRICIA K 21 CHURCH ST FREDERICK MD 21701	1.1 TITLE	President "D" <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	Thomas W. Becker "D"
STREET ADDRESS		1.3 STREET ADDRESS	260 E. Saginaw
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Lansing, MI 48926-4246
TITLE	P BECKER, THOMAS W 801 S WAVERLY, #101 LANSING MI 48917	2.1 TITLE	President Elect <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Janice Hix, CMC "D"
STREET ADDRESS		2.3 STREET ADDRESS	6000 Lake Forrest Dr., #435
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Atlanta, GA 30328
TITLE	V HIX, JANICE M 6000 LAKE FOREST DR ATLANTA GA	3.1 TITLE	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Tuck Marshall "D"
STREET ADDRESS		3.3 STREET ADDRESS	7601 W. 191st St., 2nd Floor West
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Tinley Park, IL 60477
TITLE	S NORTON, PATRICIA L 333 WEST HAMPTON AVE 701 ENGLEWOOD CO 80110	4.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Michael P. Hindman "D"
STREET ADDRESS		4.3 STREET ADDRESS	5599 San Felipe St., #1208
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Houston, TX 77056-2721
TITLE	T GAFFNEY, R E JR 4350 E CAMELBACK, #100C PHOENIX AZ 85018	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	M KINNEY, KAY R 8201 GREENSBORO DR. MACLEAN VA 22102	6.1 TITLE	Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	Brian J. Kinsella "D"
STREET ADDRESS		6.3 STREET ADDRESS	8201 Greensboro Dr., #300
CITY-ST-ZIP		6.4 CITY-ST-ZIP	McLean, VA 22102

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ 1-27-97 703)610-9009  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)