

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006247

1. Entity Name

SERVMOR MORTGAGE CORPORATION

FILED
Feb 28, 2000 8:00 am
Secretary of State

02-28-2000 90064 037 ***150.00

Principal Place of Business

10555 E. DARTMOUTH AVE.
 SUITE 200
 AURORA CO 80014

Mailing Address

10555 E. DARTMOUTH AVE.
 SUITE 200
 AURORA CO 80014

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

84-1132693

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VANNESS, RANDEE
 20 S. POINCIANA DR.
 SATELLITE BEACH FL 32937

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: C Delete
 NAME: PFISTER, RONALD F
 STREET ADDRESS: 10555 E. DARTMOUTH AVE., SUITE 200
 CITY-ST-ZIP: AURORA CO 80014

TITLE: D Delete
 NAME: PFISTER, MARCIA M
 STREET ADDRESS: 10555 E. DARTMOUTH AVE.
 CITY-ST-ZIP: AURORA CO 80014

TITLE: P Delete
 NAME: PFISTER, RONALD F
 STREET ADDRESS: 4468 W. LAKE CIRCLE
 CITY-ST-ZIP: LITTLETON CO 80123

TITLE: S Delete
 NAME: PFISTER, MARCIA M
 STREET ADDRESS: 4468 W. LAKE CIRCLE
 CITY-ST-ZIP: LITTLETON CO 80123

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
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TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald F. Pfister, President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-14-00 (303) 338-1611