2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 25, 2001 8:00 am E Secretary of State **DOCUMENT # N50264** 05-25-2001 90291 018 ****61.25 NEIGHBORHOOD LENDING PARTNERS, INC. Principal Place of Business Mailing Address 2002 N LOIS AVENUE 2002 N LOIS AVENUE 771734 **SUITE #150 SUITE #150** TAMPA FL 33607 TAMPA FL 33607 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3138324 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CORPORATION INFORMATION SERVICES 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOT 3: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaig : Financing \$5.00 May Be Trust Fund Contril ution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10 Boo Brown, Bab Tr., Bld #1, Suite 610 Addition TD **Z** Delete TITLE NAME DAVIS, SEAN NAME STREET ADDRESS 13535 FEATHER SOUND DR, STE #160 STREET ADDRESS Clearwater, FL 33762 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33762 ☐ Addition ☐ Change TITLE ☐ Delete TITLE reyes, debra s. NAME NAME STREET ADDRESS STREET ADDRESS 2002 N LOIS AVE, STE #150 CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33761 Williams, Bruce 401 E. Jackson St., 10th FL Change TITLE Delete TITLE WILLIAMS, BRUCE NAME NAME 401 E. JACKSON ST., 10TH FL. STREET ADDRESS STREET ADDRESS Tampa, FL 33602 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** Addition | ☐ Change Delete ח TITLE TITLE williams, Robert BOYLE, SCOTT NAME NAME 333 Third Avenue North STREET ADDRESS 6100 4TH STREET NORHT STREET ADDRESS St. Petersburg, FL 33701 CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33703 Addition Delete Change TITLE TITLE Henry , Chery! MCCREE, DOUGLAS I NAME NAME 400 N. Ashley Dr. 2nd FL 400 N ASHLEY DR, 2ND FLOOR STREET ADDRESS STREET ADDRESS Tampa, FC 33602 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** Change ☐ Addition CD ☐ Delete TITLE Marshall, John 2028 E. 7th Avenue TITLE MARSHALL, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 2028 E. 7TH AVE. Tampa, FL 33 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33605** 12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered

FILED

(813)879-4525

5-23-01

Attrach ment

Entity Name: Neighborhood Lending Partners, Inc. Attachment to Uniform Business Report Document #N50264

DOC. # N 5 0264 771734

11. Additions/Changes to Officers and Directors in 10. Continued

Title:

SD

Name:

LeVarge, Lincoln

Street Address:

4144 North Armenia Avenue

City-St-Zip:

Tampa, FL 33607

Title:

TD

Name:

Brown, Keith

Street Address: City-St-Zip:

4600 W. Cypress St. Tampa, FL 33607

Addition

Addition

Signature:

Debra S. Reves, Presider

5-23-01

Date

(813)879-4525

Daytime Phone #