

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90167 049 ***150.00

DOCUMENT # P11054

1. Entity Name

CROSSLAND MORTGAGE CORP.

Principal Place of Business

Mailing Address

**3902 SOUTH STATE STREET
 SALT LAKE CITY UT 84107
 US**

**3902 SOUTH STATE STREET
 SALT LAKE CITY UT 84107-1509
 US**

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

87-0274895

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

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	P SUMNER, CHRISTOPHER	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3902 SOUTH STATE STREET SALT LAKE CITY UT 84107		
<input type="checkbox"/> Delete	SV MILLER, PAUL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3902 SOUTH STATE STREET SALT LAKE CITY UT 84107		
<input type="checkbox"/> Delete	EVS CASPER, BRIAN O	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3902 SOUTH STATE STREET SALT LAKE CITY UT 84107		
<input type="checkbox"/> Delete	SV PEDERSEN, RON	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3902 SOUTH STATE STREET SALT LAKE CITY UT 84107		
<input type="checkbox"/> Delete	V MARKS, MICHAEL S	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3902 SOUTH STATE STREET SALT LAKE CITY UT 84107		
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00

Date

801-269-7600

Daytime Phone #

CP 1004 (FORM)