

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90002 012 ***150.00

DOCUMENT # P94000020348

1. Entity Name

CANTERBURY MORTGAGE BANKING, INC.

Principal Place of Business

~~6000 NW 4TH AVE
 SUITE 107
 BOCA RATON FL 33487
 US~~
CHANGE.

Mailing Address

~~6000 NW 4TH AVE
 SUITE 107
 BOCA RATON FL 33487-2924
 US~~
CHANGE.

2. Principal Place of Business

2066 N. OCEAN BLVD.

3. Mailing Address

2066 N. OCEAN BLVD.

Suite, Apt. #, etc

2 NE.

Suite, Apt. #, etc.

2 NE.

City & State

BOCA RATON FL

City & State

BOCA RATON FL



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0475182

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GERSHON, HOLLY G
 1489 W. PALMETTO PARK RD
 STET. 429
 BOCA RATON FL 33486**

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DPS	FIELD, MAXWELL J	6000 NW 4TH AVENUE	BOCA RATON FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
DPS.	FIELD, MAXWELL J	2066 N. OCEAN BLVD.	BOCA RATON, FL 33431.	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 empowerments.

SIGNATURE:

Maxwell J. Field

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Apr 3, 2000. (561) 338-8877.

Date

Daytime Phone #

CR2E034 (9/99)