2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT# P9800083315

APPROVEL PS (a) 2

2			00 SEP 20 AH 11: 36	5
First liberty Mortgage, Inc.			1	
Principal Place of Business Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
11454 y.s. Highway One.				
11454 U.S. Highway One. Palm Blach Gardens, FL 33408				
Principal Place of Business 3. Mailing Address			_	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
Palm BCh Gardens, 12	City & State		4. FEI Number 65-0864374	Applied For Not Applicable
33408 Country Palm BCh	Zip	Country		.75 Additional Required
6. Name and Address of Current F	legistered Agent		7. Name and Address of New Registered Ager	nt
First Liberty Motgage, ulma. Street Address (P.O. Box Numbers Not Acceptable)				
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 \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. Trust Fund Contribution.				
11. OFFICERS AND (DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP THE WILLIAM R. BUILDING R.	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10000341762 -10/06/000112	Change
TITLE POLL BCh · Gall STREET ADDRESS CITY-ST-ZIP	deno. Diglete 33408	TITLE NAME STREET ADDRESS CITY-ST-ZIP	****300.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· .] Change
TITLE	☐ Delete	TITLE		Change 🔲 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.

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Delete

Delete

William R. Burns 9-18-00 (561)630-4646

NO OFFICER OR DIRECTOR

Dayline Phone #

☐ Change

☐ Change

Addition

☐ Addition

September 19, 2000

So wedom et may concern.

Please be advese that the address of First liberty Mortgag is 11454 U.S. Highway One Palm Beach Garden, FZ 33408

My Corporation was placed on an emactive Status due to me mot receiving my mailing. Please reactivate my Corporation! Thank you!

Simcerely,

William Burs