

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V05584

1. Entity Name

ARVIDA MORTGAGE SERVICES, INC.

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90063 001 ***150.00

Principal Place of Business

Mailing Address

ATTN: E. KLEMENTS
~~49353 US HWY 19 NORTH~~
~~CLEARWATER FL 33764~~
~~US~~

~~P.O. BOX 6600~~
~~CLEARWATER FL 33759-6600~~
~~US~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

300 S. PARK PLACE BLVD.

3. Mailing Address

1650 Prudential Drive

Suite, Apt. #, etc.

150

Suite, Apt. #, etc.

Suite 400-Attn. Legal Dept.

City & State

CLEARWATER, FL

City & State

Jacksonville, FL

4. FEI Number

59-3105806

Applied For

Not Applicable

Zip

33759

Country

US

Zip

32207

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FISHER POWERS, JILL E
~~49353 US HWY 19 N.~~
~~SUITE 100~~
~~CLEARWATER FL 33764~~

Name

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

300 S. PARK PLACE BLVD., 150

City

CLEARWATER

FL

Zip Code

33759

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DCEO	COPE, RICHARD W	19353 US HWY. 19 NORTH, SUITE 100	CLEARWATER FL 33764	<input type="checkbox"/>
D	MOTTA, JAMES D	7900 GLADES ROAD	BOCA RATON FL 33764	<input type="checkbox"/>
DP	MUELLER, JAMES G.	7100 W. COMMERCIAL BLVD.	FT. LAUDERDALE FL 33319	<input checked="" type="checkbox"/>
TS	STICCO, LEWIS A.	49353 US HWY. 19 NORTH, SUITE 100	CLEARWATER FL 33764	<input type="checkbox"/>
V	COPE, CHRISTOPHER R	49353 US HWY. 19 N., STE 100	CLEARWATER FL 33764	<input type="checkbox"/>
DV	REGAN, MICHAEL N	1650 PRUDENTIAL DR. STE 400	JACKSONVILLE FL	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		300 S. PARK PLACE BLVD., #150	CLEARWATER, FL 33759	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	Robert M. Rhodes	1650 Prudential Drive, #400	Jacksonville, FL 32207	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VAS	JILL FISHER POWERS	300 S. PARK PLACE BLVD. #150	CLEARWATER FL 33759	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PT		300 S. PARK PLACE BLVD #150	CLEARWATER FL 33759	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		300 S. PARK PLACE BLVD #150	CLEARWATER FL 33759	<input checked="" type="checkbox"/>	<input type="checkbox"/>
AS	Susan G. Whitlatch	1650 Prudential Drive. #400	Jacksonville, FL 32207	<input type="checkbox"/>	<input checked="" 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)(f), 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:

Lewis A. Sticco
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

Date

771-7238887

Daytime Phone #

CR2E034 (9/99)