

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000003313

FILED
Jan 08, 2003
Secretary of State

Entity Name: FLORIDA COMMUNITY LOAN FUND, INC.

Current Principal Place of Business:

3107 EDGEWATER DRIVE
SUITE 2
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

3107 EDGEWATER DRIVE
SUITE 2
ORLANDO, FL 32804 US

New Mailing Address:

FEI Number: 65-0545058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROMANI, BARBARA
8750 DORAL BLVD N
7C
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ROMANI, BARBARA
Address: 8750 DORAL BLVD NO 7C
City-St-Zip: MIAMI, FL 33178

Title: VCD () Delete
Name: HORVATH, DANIEL
Address: 302 BARCELONA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: SD () Delete
Name: ANDERSON, MILES
Address: 2030 MIOYETTE RD
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD () Delete
Name: NOBLE, CARLOS
Address: 700 BRICKELL AVE
City-St-Zip: MIAMI, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: BM () Change (X) Addition
Name: ANDREWS, ARNOLD P
Address: 1213 16TH STREET, NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: BM () Change (X) Addition
Name: BROWN, DOUGLAS B
Address: 128 EAST FORSYTH STREET
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA ROMANI

CD

01/08/2003

Electronic Signature of Signing Officer or Director

Date

TONI WATTS, BM
1920 EAST HILLSBOROUGH AVENUE
TAMPA, FL 33610

ANTHONY RIGGO, BM
225 WATER STREET, FL0041
JACKSONVILLE, FL 32202

JUDITH F. KOVISARS, BM
225 SOUTH ORANGE AVENUE, 1590
ORLANDO, FL 32801

ANN KASHNER, BM
1001 BRICKELL BAY DRIVE, 2910
MIAMI, FL 33131

ANTHONY M. JONES, BM
600 CLEVELAND STREET, 800
CLEARWATER, FL 33755-4159

FR. ROBERTO GRAZA, BM
3220 NW 7TH STREET
MAIMI, FL 33127

GWENDOLYN DAWSON, BM
233 S.W. 3RD STREET
P.O. BOX 2468
OCALA, FL 34474-2468

ABELARDO CORTEZ, BM
3012 MERCY DRIVE
ORLANDO, FL 32808

DAVID A. CHRISTIAN, BM
400 ASHLEY DRIVE, 2ND FLOOR
TAMPA, FL 33602

RICK CASEY, BM
1403 12TH STREET
KEY WEST, FL 33040

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