2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 26, 2005 08:00 AM **DOCUMENT # 518615** Secretary of State 1. Entity Name TAYLOR MORTGAGE AND INVESTMENT, INC. Mailing Address Principal Place of Business 1111 KANE CONCOURSE, 619 1111 KANE CONCOURSE,619 BAY HARBOR ISLANDS FL 33154 BAY HARBOR ISLANDS FL 33154, 3. Mailing Address 2. Principal Place of Business Suite, Apt #, etc. Suite, Apt. #, etc. CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-1704646 Not Applicate Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TAYLOR, MITCHELL Street Address (P.O. Box Number is Not Acceptable) 1111 KANE CONCOURSE,619 BAY HARBOR ISLANDS FL 33154 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Bo After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition DILE PD Delete HILLY TAYLOR, MITCHELL NAME NAME STREET ADDRESS 1111 KANE CONCOURSE,619 CIRCEL ADDRESS BAY HARBOR ISLANDS FL CITY-SE-ZIP CITY-ST-ZIP ☐ Change 1/00000196114 Addition VST ☐ Delete HILE HTEE NAME EEFTING, ILENE B. NAME 01/26/05**-80**056-023 150.00 STREET ADDRESS 1111 KANE CONCOURSE,619 STREET ADDRESS BAY HARBOR ISLANDS FL CHY-ST-ZP CILL-ST-JIP Change Addition Detete TITLE EEFTING, ILENE B NAME NAME STREET ADDRESS 1111 KANE CONCOURSE, 619 STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP BAY HARBOR ISLANDS FL Change Addition ☐ Delete 1/U ϵ THILE TAYLOR, CARL NAME MALLE 1111 KANE CONCOURSE, 619 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BAY HARBOR FL CITY-ST-ZIP ☐ Change Addition Addition Title Dejete NAME NAME SUBTEL ADORESS STREET ADDRESS CHY-ST-7(P CITY-SI-ZIP Delete Change ☐ Additior iiiii IIRE NAME STREELAUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with-all other like empowered.

SIGNATURE:

leteles Taylor MITCHELL TAYLOR 1

1/24/65 305 864 Daylene Phone &

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