2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 848152 1. Entity Name MORTGAGE AND SECURITY INVESTMENT COMPANY				FILED Jan 21, 2000 8:00 am Secretary of State 01-21-2000 90120 040 ***150.00		
Principal Place of Business 606 CYPRESS GARDENS ROAD C/O STANLEY C. DAVIS WINTER HAVEN FL 33880 2. Principal Place of Business		Mailing Address 606 CYPRESS GARDENS ROAD C/O STANLEY C. DAVIS WINTER HAVEN FL 33880-4457 3. Mailing Address				
City & State		City & State		4. FEI Number 59-1389304 Applied Fo		
Zip	Country	Zip	Country	-5. Certificate of Status Desired Status Desired Fee Required	2010	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent		
DAVIS, DENNIS G.				ess (P.O. Box Number is Not Acceptable)		
223 NASSAU ROAD WINTER HAVEN FL 33880						
			City	FL Zip Code		
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	After MAY 1, 20 Make Check Payat	!! FEE IS \$150.00 00 Fee will be \$550.00 e to Department of S 12.	Intrast Fund Contribution. L Added to rees	3	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GEE, JUANITA V 1926 FOXHOLLOW DR AUBURNDALE, FL 00000		TITLE NAME STREET ADDRESS CITY - ST - ZIP		dition =	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD EVANS, KAREN D 3801 THRONHILL RD. WINTER HAVEN, FL 00000	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Add	dition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIS, DENNIS G 223 NASSAU ROAD WINTER HAVEN, FL 00000	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change 🗌 Add	iition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WITTENBERG, BARBARA 142 LAKE RING DR. WINTER HAVEN FL	🗌 Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	🗌 Change 📋 Add	lition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Ado	lition	
TITLE NAME STREET ADDRESS CITY - ST- ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Add		
indicated of the cor	on this report or supplemental report i poration or the receiver or trustee emp or on an attachment with an address,	s true and accurate and that r owered to execute this report with all other like empowered	ny signature shall have the as required by Chapter 6	in Section 119.07(3)(i), Florida Statutes. further certify that the informatic the same legal effect as if made under oath; that I am an officer or direct r 607, Florida Statutes; and that my name appears in Block 11 or Block 1 Market 1/17/00 (863) 294 3254 Date Date Date Date Phone #	tor	