| 2001 | UNIFO | DRM | BUSINESS | REPORT | (UBR |
|------|-------|-----|-----------------|---------------|------|
|------|-------|-----|-----------------|---------------|------|

| DOCUMENT # A9500002032 1. Entity Name BARON FIRST TIME HOME BUYER MORTGAGE PARTNERSHIP | | | | | | FILED O1 APR 27 PN 6 06 | | | | |
|--|--------------------------------|---|--|----------------------|--|---------------------------------|---------------------------------------|---------------------------|---------------------------------|---|
| BARON | FIRST TIME | HOME BUYER MORTO | gage partnership | | | | em, ije. • mana2 | 1 27 P | 6 06 | |
| Principal Place of Business C/O GREGORY MCGRATH 7826 COOPER ROAD CINCINNATI OH 45242 | | Mailing Address C/O GREGORY MCGRATI- 7826 COOPER ROAD CINCINNATI OH 45242 | | | | SECRET Tallaha Mananan | | | | |
| 2. Principal F | 2. Principal Place of Business | | 3. Mailing Address | | | - | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | | |
| City & Sta | ite | · · · | City & State | | | 4. FEI Numbe | 58-2236134 | | Applied F | |
| Zip | | Country | Zip | Cour | ntry | 5. Certificate | of Status Desired | ☑ \$8 | 3.75 Additional e Required | |
| | 6. Name | and Address of Current | Registered Agent | | | 7. Name and | Address of New Ro | | | |
| HOODATH | | , | | | Name | | | | • | |
| | i, gregor' e oe mexii | r CO DR. #101 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | AT KEY FL 3 | | | | | | | | | |
| | | | | | City | • | | FL | Zip Code | |
| 8. The above | a named entit | y submits this statement fo | or the purpose of changing its | register | ed office or register | ed agent, or both | , in the State of Flor | 1 | | |
| | | | | - | _ | | | | | |
| SIGNATURE | Signature, typed | or printed name of registered agent | and title if applicable. (NOT | Registere | ed Agent signature required | f when reinstating) | | DATE | | - |
| 9. Capital Co as Shown | on record. | \$99.00 | 10. Amount of Capit in FLORIDA to d | ite. | | | | E SIDE FOR F | DEPT. OF STATE EE INFORMATIO | |
| | A (NOTE | GENERAL PARTNER 1 General Partners MA | THAT IS A BUSINESS EN AY NOT be changed on the | FITY M e form | IUST BE REGIST n; an amendmen | TERED AND A It must be filed | CTIVE WITH THIS I to change a gei | S OFFICE. neral partne | er. | |
| 12. | | GENERAL PARTNER | · · · · · · · · · · · · · · · · · · · | 13. | | | ADDRESS CHA | | | |
| DOCUMENT # NAME STREET ADDRESS | BARON CAPITAL XV, INC. | | | EET ADDRESS | | | · | | CR2E003 (11/00) | |
| CITY-ST-ZIP | | T OH 45242 | | GIT | '-ST-ZIP | ` | | | | |
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| STREET ADDRESS CITY-ST-ZIP | | | | CITY | -ST-ZIP | | 10 | | | |
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| STREET ADDRESS * | <u>.</u> | | | CITY- | -ST-ZIP | | | | _ | |
| indicated | on this repor er or trustee | is true and accurate and empowered to execute this | this filing does not qualify for that my signature shall have is report as required by Chapt | ne same er 620, F | e legal effect as if m | A | regory K. pril 25, 20 13) 984-5 | 01 | th | f |