

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000773

1. Entity Name

HOMEOWNERS LOAN CORP.

FILED
Jan 20, 2001 8:00 am
Secretary of State

01-20-2001 90073 043 ***150.00

Principal Place of Business

4501 CIRCLE 75 PARKWAY, SUITE F6220
ATLANTA GA 30339

Mailing Address

4501 CIRCLE 75 PARKWAY, SUITE F6220
ATLANTA GA 30339

2. Principal Place of Business

N/A

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 52-2113031

Applied For

Not Applicable

Zip

Country

Zip

Country

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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, 2001 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 P
NAME KERNION, CHRIS
STREET ADDRESS 4501 CIRCLE 75 PARKWAY, SUITE F6220
CITY-ST-ZIP ATLANTA GA 30339 ☐ Delete

TITLE CFO
NAME Henderson, Bob
STREET ADDRESS 4501 Circle 75 Parkway, Ste F6220
CITY-ST-ZIP Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE V
NAME BONADONNA, CHAD
STREET ADDRESS 4501 CIRCLE 75 PARKWAY, SUITE F6220
CITY-ST-ZIP ATLANTA GA 30339 ☐ Delete

TITLE D
NAME Trevino, Javier
STREET ADDRESS 700 San Bernardo Ave.
CITY-ST-ZIP Laredo, TX 78040 ☐ Change ☒ Addition

TITLE S
NAME WHITWORTH, C. EDWARD
STREET ADDRESS 700 SAN BERNARDO AVENUE
CITY-ST-ZIP LAREDO TX 78040 ☒ Delete

TITLE V
NAME Polk, Keith
STREET ADDRESS 4501 Circle 75 Parkway, Ste F6220
CITY-ST-ZIP Atlanta, GA 30339 ☐ Change ☒ Addition

TITLE CD
NAME JACOBS, JACK
STREET ADDRESS 101 WEST SIXTH STREET, SUITE 407
CITY-ST-ZIP AUSTIN TX 78701 ☐ Delete

TITLE V
NAME Arceneaux, Toby
STREET ADDRESS 4501 Circle 75 Parkway, Ste F6300
CITY-ST-ZIP Atlanta, Ga 30339 ☐ Change ☒ Addition

TITLE D
NAME DAVIS, JOHN
STREET ADDRESS 503 WESTWOOD TERRACE
CITY-ST-ZIP AUSTIN TX 78746 ☐ Delete

TITLE V
NAME Copas, Scott
STREET ADDRESS 7351 Shadeland Station, Ste 100
CITY-ST-ZIP Indianapolis, IN 46256 ☐ Change ☒ Addition

TITLE D
NAME SPINELLI, REYNALDO A
STREET ADDRESS 700 SAN BERNARDO AVE.
CITY-ST-ZIP LAREDO TX 78040 ☐ Delete

TITLE V
NAME Jones, Tracy
STREET ADDRESS 3999 S. Sherwood Forest Blvd., Ste 20
CITY-ST-ZIP Baton Rouge, LA 70816 ☐ Change ☒ Addition

13. I hereby 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRIS KERNION
PRESIDENT & CEO

Date 1/8/01

Daytime Phone # 770-850-6802

CR2E034 (10/00)

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