

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000001014

FILED
Sep 09, 2003
Secretary of State

Entity Name: ALLIGATOR KEY MORTGAGE COMPANY

Current Principal Place of Business:

2717 WEST CYPRESS CREEK RD.
SUITE 802
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2717 WEST CYPRESS CREEK RD.
SUITE 802
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 06-1416540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, NATALIE
1475 S.E. 15TH ST.
UNIT 101
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

SMITH, NATALIE L
1475 S.E. 15TH ST.
UNIT 101
FORT LAUDERDALE, FL 33311 US

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: NATALIE L. SMITH

09/09/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, NATALIE
Address: 2802 OAKLAND PARK BLVD. #273
City-St-Zip: FT LAUDERDALE, FL 33311

Title: S () Delete
Name: MCCAFFERN, WILLIAM B
Address: 167-3 MT ARCHER RD
City-St-Zip: LYME, CT 06371

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, NATALIE L
Address: 22976 OVERSEAS HIGHWAY
City-St-Zip: CUDJOE KEY, FL 33042

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATALIE L. SMITH

P

09/09/2003

Electronic Signature of Signing Officer or Director

Date