

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90019 019 ***550.00

013461 AT

DOCUMENT # F00000001294

1. Entity Name

UNION MORTGAGE COMPANY



Principal Place of Business

**8241 DOW CIRCLE W
STRONGSVILLE OH 44136**

Mailing Address

**8241 DOW CIRCLE W
STRONGSVILLE OH 44136**

C0074032



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

34-1084436

Applied For

Not Applicable

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

**NORTON, SAM
1819 MAIN ST., SUITE 610
SARASOTA FL 34236**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
HEGWER, MANFRED
8241 DOW CIRCLE W
STRONGSVILLE OH 44136** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PV
COSGROVE, C. WILLIAM
8241 DOW CIRCLE W
STRONGSVILLE OH 44136** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BERRY, DAVID
8241 DOW CIRCLE W
STRONGSVILLE OH 44136** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**KRYCH, Kellie / TD
8241 Dow Circle West
STRONGSVILLE, OH 44136** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
REILLY, DOUG
8241 DOW CIRCLE W
STRONGSVILLE OH 44136** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Jocile Cammerata
8241 Dow Circle West
STRONGSVILLE, OH 44136** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
LOUIS, DEBBIE
8241 DOW CIRCLE W
STRONGSVILLE OH 44136** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/01 440234436529
Date Daytime Phone #

CR2E034 (5/01)