2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000000525

Entity Name: COLLATERAL ONE MORTGAGE CORPORATION

FILED Sep 13, 2002 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5932 TIMBER RIDGE ROAD SUITE 202 PROSPECT, KY 40059 **New Mailing Address: Current Mailing Address:** 5932 TIMBER RIDGE ROAD SUITE 202 PROSPECT, KY 40059 FEI Number: 61-1360435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: PRFS (X) Change () Addition MURATORE, VINCENT Name: Name: DUNCAN, MATT 1700 NW 64TH STREET, STE 100 8600 GLENFIELD WAY Address: Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: LOUISVILLE, KY 40241 Title: Title: () Delete (X) Change () Addition EVERSLAGE, WILLIAM Name: EVERSLAGE, WILLIAM Name: 3605 GLENFIELD COURT 6307 WALNUT RIDGE TRIAL Address: Address: LOUISVILLE, KY PROSPECT, KY 40059 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition GLATZ, MARK Name: Name: 7010 REDCOAT DR Address: Address: City-St-Zip: FLOURTOWN, PA City-St-Zip: Title: (X) Delete Title: () Change () Addition CUTILLO, LOUIS Name: Name: Address: 12 EAST OREGON AVE Address: City-St-Zip: PHILADELPHIA, PA City-St-Zip: Title: Title: () Delete () Change () Addition MENDELSON, MARK Name: Name: 12 EAST OREGON AVE Address: Address: City-St-Zip: PHILADELPHIA, PA 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: MATT DUNCAN PRES 09/13/2002