

2002 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
Mar 12, 2002 8:00 am
Secretary of State

01-24-2002 90168 017 ***150.00

DOCUMENT # F01000000914

1. Entity Name
LCB HOME LOANS, INC.

Principal Place of Business
**301-B EAST MARKET STREET
FAYETTEVILLE TN 37334**

Mailing Address
**PO BOX 73
FAYETTEVILLE TN 37334**

17396



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
**2300 Thornton Taylor Pkwy.
Suite A**

3. Mailing Address
Suite, Apt. #, etc.

City & State
Fayetteville, TN

City & State

4. FEI Number
62-1822433

Applied For
Not Applicable

Zip
37334

Country
LINCOLN

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

Name

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

City

FL

Zip Code

**PITTMAN, KAY S
3157 CARRIAGE CIRCLE
NAPLES FL 34105**

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 *Lissa L. Burton*
Signature, typed or printed name of registered agent and title if applicable.

LISSA L. BURTON

1-9-02

(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, 2002 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** ☐ Delete
NAME **BOBBITT, CHARLOTTE R**
STREET ADDRESS **301-B EAST MARKET STREET**
CITY-ST-ZIP **FAYETTEVILLE TN 37334**

TITLE **ST** ☐ Delete
NAME **NEECE, LISSA L**
STREET ADDRESS **301-B EAST MARKET STREET**
CITY-ST-ZIP **FAYETTEVILLE TN 37334**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
NAME **BOBBITT, CHARLOTTE R.**
STREET ADDRESS **2300 THORNTON TAYLOR PKWY, STE. A.**
CITY-ST-ZIP **FAYETTEVILLE, TN 37334**

TITLE **ST** ☒ Change ☐ Addition
NAME **BURTON, LISSA L.**
STREET ADDRESS **2300 THORNTON TAYLOR PKWY, STE. A.**
CITY-ST-ZIP **FAYETTEVILLE, TN 37334**

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

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

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

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

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: *Lissa L. Burton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISSA L. BURTON

1-9-02

931-438-4922

931-425-6243

CR2E034 (9/01)