

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2002 8:00 am
Secretary of State

07-11-2002 90244 046 ***150.00

DOCUMENT # F01000003332

1. Entity Name
FRONTIER FINANCIAL CORP.

Principal Place of Business

**3045 E. HENRIETTA RD.
 HENRIETTA NY 14467**

Mailing Address

**3045 E. HENRIETTA RD.
 HENRIETTA NY 14467**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

PO Box 30

Suite, Apt. #, etc.

W. HENRIETTA

City & State

New York

Zip

14586

Country

USA

4. FEI Number

16-1514142

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 13, 2002 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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	CPST			
	SQUIRES, MARK			
	3045 E. HENRIETTA RD.			
	HENRIETTA NY 14467			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> 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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED 7/5/02

Date

Daytime Phone #

585-321-1500

CR2E034 (4/02)

All attachment
FO1000003332

Frontier Financial Corp.
Registered Mortgage Broker-NYS / FL Banking Dept.
3045 E. Henrietta Rd.
Henrietta, NY 14467
585-321-1500
Fax 585-723-5589

To: Florida Department of State
Division of Corporations

From: Mark Squires
7/5/2002

Re: Uniform Business Report

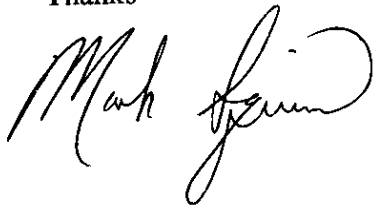
2002-07-05 10:00 AM
MAIL ROOM
CORPORATION DIVISION
STATE OF FLORIDA

To Whom it May Concern,

I received the UBR documentation packet 7/3/02. I called the FL Division of Corporations on 7/3/02 to explain that the building Landlord thought my original January packet was junk mail and said he may have tossed it. The Div of Corp representative I spoke to, said to mail a check for \$150 along with this Letter Of Explanation and we would be set. Please note that I have changed my mailing address to avoid this situation in the future.

Your understanding in this matter is appreciated.

Thanks



STATE OF FLORIDA
CORPORATION DIVISION
1901 E. BAYVIEW BLVD
MIAMI, FL 33133
TEL: (305) 374-3000
WWW.DOS.FL.GOV