

FD1000005809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200040678622

09/10/04--01049--001 **35.00

FILED
04 SEP 10 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T BROWN SEP 17 2004

RA change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FirstTrust Mortgage, Inc.
(Name of corporation)

DOCUMENT NUMBER: FO1000005809 ?

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patricia Schoenewe (Patty)
(Name of contact person)

FirstTrust Mortgage, Inc.
(Firm/Company)

12705 S. Mur Len Rd, Suite A7
(Address)

Olathe, KS 66062
(City/state and zip code)

For further information concerning this matter, please call:

Patty Schoenewe at 913, 312-2000 ex. 204
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Kansas in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FirstTrust Mortgage, Inc.
2. The principal office address: 12705 S. MurLerr Rd, Ste A7
Olathe, KS 66062
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 11/1/01 Document number: FEI # 48-0893828
F01000005809
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Florida Filing & Search Services, Inc.
1333 North Duval St.
Tallahassee, FL 32302

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Roni Moore
255 Miracle Strip Parkway
(P.O. Box NOT acceptable) Bld' 5, Ste 120
Fort Walton Bch, FL 32548

04 SEP 10 AM 11:45
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Patricia Schoenewe Patricia Schoenewe
(Signature of an officer or director) (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Roni Moore 8/31/04
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Roni Moore
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314