

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90130 029 ***150.00

DOCUMENT # F02000004351

1. Entity Name
CUSTOM MORTGAGE SOLUTIONS, INC.



Principal Place of Business
**402 SOUTH WHITE HORSE PIKE
AUDUBON NJ 08106**

Mailing Address
**402 SOUTH WHITE HORSE PIKE
AUDUBON NJ 08106**



2. Principal Place of Business
1000 Voorhees Drive
Suite, Apt. #, etc.

3. Mailing Address
1000 Voorhees Drive
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Voorhees, NJ
Zip
08043 Country
USA

City & State
Voorhees, NJ
Zip
08043 Country
USA

4. FEI Number
22-3764210

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
ROGERS, WILLIAM M
402 SOUTH WHITE HORSE PIKE
AUDUBON NJ 08106** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
OLIVER, THOMAS
402 SOUTH WHITE HORSE PIKE
AUDUBON NJ 08106** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Rogers, William M
1000 Voorhees Drive
Voorhees, NJ 08043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
Oliver, Thomas
1000 Voorhees, Drive
Voorhees, NJ 08043** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP, Executive
Arena, Charles
1000 Voorhees Drive
Voorhees, NJ 08043** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP, Senior
Huffman, Kerry
1000 Voorhees Drive
Voorhees, NJ 08043** ☐ Change ☒ Addition

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

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

12. 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 10 or Block 11 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

M. Rogers, President 1/15/03 (856) 784-2300
Date Daytime Phone #

CR2E034 (10/02)