

FD7000005449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

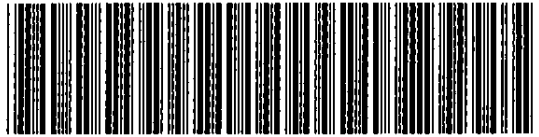
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Chang
Thew
4/1/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SR Mortgage, Inc. dba: Seniors Reverse Mortgage, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F07000005449

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:

Christine Louie
(Name of Contact Person)

Seniors Reverse Mortgage, Inc.
(Firm/Company)

3478 Buskirk Avenue, Suite 343
(Address)

Pleasant Hill, CA 94523
(City/State and Zip Code)

For further information concerning this matter, please call:

Christine Louie at (925) 979-9350
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2008

CHRISTINE LOUIE
SENIORS RESERVE MORTGAGE, INC.
3478 BUSKIRK AVENUE, SUITE 343
PLEASANT HILL, CA 94523

SUBJECT: SR MORTGAGE, INC.
Ref. Number: F07000005449

We have received your document for SR MORTGAGE, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 108A00016518

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 California _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SR Mortgage, Inc. dba: Seniors Reverse Mortgage, Inc.
2. The principal office address: 3478 Buskirk Avenue, Suite 343, Pleasant Hill, CA 94523
3. The mailing address (if different): _____
4. Date of incorporation/qualification: May 6, 2003 Document number: F07000005449
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Henry DeWeerd

13043 U.S. Hwy 19

Hudson, FL 34667

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

Jim Boswell

542 N. Eglin Pkwy

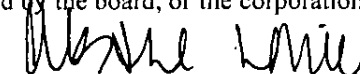
(P.O. Box NOT acceptable)

Ft. Walton Bch, FL 32547

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(Signature of an officer or director)

Christine Louie, Vice President
(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.


(Signature of Registered Agent)

2/14/08
(Date)

If signing on behalf of an entity:

Jim Boswell

(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