

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000002258

1. Entity Name

MCKINLEY MORTGAGE COMPANY, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90054 017 ***150.00

Principal Place of Business

Mailing Address

320 N. MAIN. STE. 200
 ANN ARBOR MI 48104

320 N. MAIN. STE. 200
 ANN ARBOR MI 48104-1127

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **38-3105422**

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

7. Name and Address of New Registered Agent

KALEITA, GARY M
 215 NORTH EOLA DRIVE
 ORLANDO FL 32801

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.

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 \$150.00
After MAY 1, 2000 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 AS ☐ Delete
 NAME O'MALLEY, PENNY H.
 STREET ADDRESS 320 N. MAIN, STE. 200
 CITY-ST-ZIP ANN ARBOR MI 48104

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

TITLE PASD ☐ Delete
 NAME TYLER, WILLIAM C
 STREET ADDRESS 320 N. MAIN, STE. 200
 CITY-ST-ZIP ANN ARBOR MI

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

TITLE SVPD ☐ Delete
 NAME LEAHY, CHARLES E
 STREET ADDRESS 320 N. MAIN, STE. 200
 CITY-ST-ZIP ANN ARBOR MI 48104

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

TITLE T ☐ Delete
 NAME WELSH, TERESA
 STREET ADDRESS 320 N. MAIN STREET, SUITE 200
 CITY-ST-ZIP ANN ARBOR MI

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

TITLE VPD ☐ Delete
 NAME HAYARD, KEITH D.
 STREET ADDRESS 320 N. MAIN, STE. 200
 CITY-ST-ZIP ANN ARBOR MI 48104

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

TITLE CEO ☐ Delete
 NAME WEISER, RONALD
 STREET ADDRESS 320 N. MAIN, STE. 200
 CITY-ST-ZIP ANN ARBOR MI 48104

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:

Charles E. Leahy
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles E. Leahy
Secretary to the G.P.

Date

Daytime Phone #

McKinley Mortgage Co.

CR2E034 (9/99)