

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2001 8:00 am
Secretary of State

09-11-2001 90006 037 ***550.00

DOCUMENT # F93000002288

1. Entity Name
FREEDOM HOME MORTGAGE CORPORATION

Principal Place of Business

1288 ROUTE 73 SOUTH
MT. LAUREL NJ 08054

Mailing Address

1288 ROUTE 73 SOUTH
MT. LAUREL NJ 08054

2. Principal Place of Business

1000 ATRIUM WAY

3. Mailing Address

Suite, Apt. #, etc.

SUITE 300

Suite, Apt. #, etc.

MT. LAUREL, NJ

City & State

City & State

08054 BURLINGTON

Zip

Country

4. FEI Number **22-3039688**

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

CORPORATED SERVICES COMPANY
1201 HAYS ST
SUITE 105
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.

SIGNATURE _____ (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 12, 2001 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	P MIDDLEMAN, STANLEY C 1288 ROUTE 73 SOUTH MT. LAUREL NJ 08054	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV HEFFERON, DANIEL 1288 ROUTE 73 SOUTH MT. LAUREL NJ 08054	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 OF STANLEY C MIDDLEMAN, PRESIDENT 9/4/01 856-231-9800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

**FREEDOM
MORTGAGE
CORPORATION**

1000 ATRIUM WAY * SUITE 300 * MOUNT LAUREL, NJ 08054

PHONE: (856) 231-9800 * FAX: (856) 642-1567

Attachment
#F9300000288
A0084964

September 5, 2001

State of Florida
Division of Corporations
Uniform Business Report Filings
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

Enclosed herewith are a completed 2001 Uniform Business Report (UBR) and a check in the amount of \$550.00 for the fee.

If you have any questions, I can be contacted at (856) 231-9800, extension 2116.

Sincerely,



Alberta Scanlon
Senior Compliance Officer

Enclosures