## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # F95000002194 Mar 31, 2000 8:00 am 1. Entity Name Secretary of State FLEET MORTGAGE GROUP, INC. 03-31-2000 90080 028 \*\*\*150.00 Principal Place of Business Mailing Address P.O. BOX 11988 1333 MAIN STREET COLUMBIA SC 29201 COLUMBIA SC 29211-1988 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 05-0483692 Not Applicable Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NQTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) X Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. TITLE ☐ Defete TITLE ☐ Change ☐ Addition TORKE, MICHAEL J NAME NAME STREET ADDRESS STREET ADDRESS 1333 MAIN STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC ☐ Change Addition TITI F **EVCF** ☐ Delete TITI F NAME naryka, william r NAME STREET ADDRESS STREET ADDRESS 1333 MAIN STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 29201 [7] Change ☐ Addition TITLE TITLE ☐ Delete SPERLING, DONNA P NAME NAME STREET ADDRESS 1333 MAIN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 🔀 Delete ☐ Change **X** Addition EVP TITLE TITLE E. Patrick Cutler Flanigan, Richard D NAME NAME STREET ADDRESS 1333 MAIN STREET STREET ADDRESS CITY-ST-ZIP (بوابیسای) CITY-ST-ZIP COLUMBIA SC 29201 29201 Addition Change CD ☐ Delete TITLE NAME SCHENCK, A. WILLIAM III NAME STREET ADDRESS STREET ADDRESS 1333 MAIN STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC Change Addition SVP ☐ Delete TITLE TITLE SHIELDS, RANDAL D NAME STREET ADDRESS STREET ADDRESS 1333 MAIN STREET CITY-ST-ZIP CITY-ST-ZIP COLUMBIA SC 29201

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 AND TYPED OR PRINTED FFICER OR DIRECTOR Vice President 3/15/00