

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002398

1. Entity Name

FTM MORTGAGE COMPANY

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90024 022 ***150.00

Principal Place of Business

Mailing Address

535 ROUTE 38
SUITE 310
CHERRY HILL NJ 08002
US

535 ROUTE 38
STE 310
CHERRY HILL NJ 08002-2972
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

SUITE 500

Suite, Apt. #, etc.

SUITE 500

City & State

City & State

4. FEI Number

23-2834903

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUNROE, W. BRADLEY ESQUIRE
239 EAST VIRGINIA STREET
TALLAHASSEE FL 32301

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 ☐ Delete
NAME **CST**
STREET ADDRESS **GREEN, RICHARD J**
CITY-ST-ZIP **FLOURTOWN SHOPPING CENTER**
FLOURTOWN PA 19031

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

TITLE ☐ Delete
NAME **DP**
STREET ADDRESS **BANK, MARVIN**
CITY-ST-ZIP **535 ROUTE 38, SUITE 310**
CHERRY HILL NJ

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **535 RTE 38, STE 500**
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GREEN, ARJUN S**
CITY-ST-ZIP **FLOURTOWN SHOPPING CENTER**
FLOURTOWN PA 19031

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GREEN, DANIEL B**
CITY-ST-ZIP **FLOURTOWN SHOPPING CENTER**
FLOURTOWN PA 19031

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

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **MEZGER, WILLIAM E JR.**
CITY-ST-ZIP **535 ROUTE 38, SUITE 310**
CHERRY HILL NJ

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **535 RTE 38, STE 500**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
Date

856-662-3131
Daytime Phone #

CR2F034 (9/99)