

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 24, 2000 08:00 AM**
Secretary of State**DOCUMENT # F97000001138**

1. Entity Name

AMERICAN NATIONAL HOME MORTGAGE, INC.

Principal Place of Business

THE TOWER, 611 COMMERCE STREET, SUITE 3102**NASHVILLE**
37203**TN**

Mailing Address

THE TOWER, 611 COMMERCE STREET, SUITE 3102**NASHVILLE**
37203**TN**2. Principal Place of Business
611 COMMERCE STREET3. Mailing Address
611 COMMERCE STREETSuite, Apt. #, etc.
SUITE 2709Suite, Apt. #, etc.
SUITE 2709City & State
NASHVILLE**TN**City & State
NASHVILLE**TN**Zip
37203Country
USZip
37203Country
US

4. FEI Number

62-1641362

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

ODOM DALE
1101 GULF BREEZE PARKWAY #334**GULF BREEZE**
32561**US****FL**

7. Name and Address of New Registered Agent

Name

SUDDARTH ANGELA M

Street Address (P.O. Box Number is Not Acceptable)

8234 AMBROSE COVE WAY

City

ORLANDO**FL**Zip Code
32819

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 **ANGELA M SUDDARTH**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/24/2000

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete
S CLEGHORN BETTY
209 LAKESHORE DR
OLD HICKORY TN 37135TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete
PCD CLEGHORN JOE
209 LAKESHORE DR
OLD HICKORY TN 37138

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
VP CALDWELL KELLIE N
100 VOLLAN COURT
HENDERSONVILLE TN 37075TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
SVP BYRAM JOSEPH A
3236 PRIESTWOODS DRIVE
NASHVILLE TN 37214TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
P FAGAN AMY B
244 LISA LANE
NASHVILLE TN 37210TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
CEO CANNATA CHARLES P
1422 GLOBE ROAD
LEWISBURG TN 37091TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
COO SUDDARTH ANGELA M
108 SECRETARIAT PLACE
HENDERSONVILLE TN 37075TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
COB SUDDARTH WILLIAM HJR
108 SECRETARIAT PLACE
HENDERSONVILLE TN 37075

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.

ALICIA MANGRUM, TREASURER
2029 SPRING MEADOW CIRCLE

SPRING HILL, TN 37174

KATHY YANCEY, SECRETARY
634 B HARPETH BEND DR

NASHVILLE, TN 37221

DIANE CASH, VP
1405 ARBOR LAKE BLVD

HERMITAGE, TN 37076