

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

Erom:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 12000000195 Phone : (850)521-1000

Fax Number : (850) 558-1515

erothe email address for this business entity to be used for future tagginual report mailings. Enter only one email address please.\*\*

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## REGISTERED AGENT CHANGE TOWNE MORTGAGE COMPANY

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

C.COULLIETTE

Electronic Filing Menu

Corporate Filing Menu

NOV 02 2010

**EXAMINER** 

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Michigan in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TOWNE MORTGAGE COMPANY
2. The principal office address:
700 Tower Drive, Suite 110, Troy, MI 48098
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/09/1997 Document number: F97000002981
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
C T Corporation System
1200 South Pine Island Road
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporation Service Company
1201 Hays Street
(P.O. Box NOT acceptable)
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered again as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, of the corporation has been notified in writing of the change.
Blanca Lozada, Attorney in Fact (Signature of an diffect or diffect) (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified my writing of this change.  Corporation Service Longany
By: - 11/02/2010
If signing on behalf of an entity:
Elizabeth A. Dawson, Asst. Vice President
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR26045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*