

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 09, 2002 8:00 am**  
**Secretary of State**

05-09-2002 90063 007 \*\*\*150.00

SECTION AT

**DOCUMENT # F98000001050**

1. Entity Name

**MERITAGE MORTGAGE CORPORATION**

Principal Place of Business

**7909 PARKLANE ROAD  
 COLUMBIA SC 29223**

Mailing Address

**7909 PARKLANE ROAD  
 COLUMBIA SC 29223**

2. Principal Place of Business

**6000 SW Meadows Road**  
 Suite, Apt. #, etc.

**Suite 500**

City & State

**Lake Oswego, OR**

Zip  
**97035**

Country

**Clarkamas**

3. Mailing Address

**9710 Two Notch Road**  
 Suite, Apt. #, etc.

City & State

**Columbia, SC**

Zip

**29223**

Country

**Richland**

4. FEI Number

**93-1186856**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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

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, 2002 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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**EVP  
 LEWIS, HAROLD JR  
 7909 PARKLANE RD  
 COLUMBIA SC 29223** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D  
 BALDWIN, MICHAEL C  
 6000 SW MEADOWS ROAD SUITE 500  
 LAKE OSWEGO OR 97035** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PD  
 ROSS, WILLIAM M  
 6650 SOUTHPPOINT PKWY  
 JACKSONVILLE FL 32216** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**T  
 HERBERT, STEVEN F  
 7909 PARKLANE ROAD  
 COLUMBIA SC 29223** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**EVP  
 Jerald W. McCoy  
 9710 Two Notch Road  
 Columbia, SC 29223** ☐ Change ☒ Addition

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

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

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☒ 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:**

**Steven F. Herbert, Chief Financial Officer**

**4/23/02 (803) 462-8539**

Date

Daytime Phone #

CR2E034 (9/01)