2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

ED OR PRINTED NAME OF SIG

SIGNATURE:

FILED Jan 29, 2000 8:00 am Secretary of State DOCUMENT # F9800001374 PREMIER LENDING CORPORATION OF GEORGIA 01-29-2000 90142 007 ***150.00 Principal Place of Business Mailing Address 2759 DELK ROAD. SUITE 201 2759 DELK ROAD, SUITE 201 MARIETTA GA 30067 MARIETTA GA 30067-8842 **NONTAR1**4 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 58-2170746 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent الدائج والمتاري فحواله فا HURST, DWIGHT Street Address (P.O. Box Number is Not Acceptable) 6339-3 ARGYLE FOREST BLVD. JACKSONVILLE FL 32244 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) 👫 📆 🖰 П Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Senior Vice President Change Addition PC00 TITLE TITLE ☐ Delete Daniel Rees 2759 Delk Rd, Suite 201 PHELPS, GEORGE NAME NAME STREET ADDRESS STREET ADDRESS 2759 DELK ROAD, SUITE 201 CITY-ST-7IP CITY-ST-ZIP Manetta, GA 30067 MARIETTA GA 30066 ☐ Change Senior Vice President **Addition** TITI F ☐ Delete TITLE Mr. Tom Byrd NAME HOLMES, DAVID 2743 Permeter Pkny, Blog 100, ste 100 STREET ADDRESS STREET ADDRESS 2759 DELK ROAD, SUITE 201 CITY-ST-ZIP CITY-ST-ZIP Augusta, GA 30909-1788 MARIETTA GA 30066 Senior Vice-President Addition TITLE ☐ Delete MG Lynn Holley 2743 Permeter PKWY, Bldg. 100, Ste-100 LAMB, RICHARD NAME NAME ___ STREET ADDRESS STREET ADDRESS 2759 DELK ROAD, SUITE 201 Augusta GA 30909-1788 CITY-ST-ZIP CITY-ST-ZIP MARIETTA GA 30066 ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME BRYANT, MICHELENE STREET ADDRESS STREET ADDRESS 2759 DELK ROAD, SUITE 201 CITY-ST-ZIP CITY-ST-ZIP MARIETTA GA 30066 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME OCONNELL, IRMA STREET ADDRESS STREET ADDRESS 2759 DELK ROAD, SUITE 201 CITY-ST-ZIP CITY-ST-ZIP MARIETTA GA 30067 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME PITTARD, DARRELL D NAME STREET ADDRESS STREET ADDRESS 2180 ATLANTA PLAZA, 950 E. PACES FERRY RD CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30326 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 of 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