

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90012 022 ***150.00

DOCUMENT # F98000005948

1. Entity Name

CHRISTENSEN MORTGAGE SERVICES, INC.

CHRISTENSEN MORTGAGE Christensen Mortgage Services, Inc.
 6 WHITE HORSE PKL. #L-4 #6 White Horse Pike, Suite L-4
 HADDON HEIGHTS, NJ 08035 Haddon Heights, NJ 08035



2. Principal Place of Business <i>above</i>		3. Mailing Address <i>above</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-2950195	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent <i>Same Agent. Just Change of Address</i>		7. Name and Address of New Registered Agent	
Name		Name GARY CHRISTENSEN	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable) #141 Nettles Blvd	
City		City	Zip Code
		Jensen Beach	FL 34957

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]* DATE **3/2/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>GARY CHRISTENSEN #141 Nettles Blvd Jensen Beach FL 34957</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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]* **GARY CHRISTENSEN** DATE: **3/2/02** DAYTIME PHONE #: **800-767-3323**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)

Attachment

F98000005948
749279

**Christensen
Mortgage
Services, Inc.**

N.J. AND FLA. LICENSED
MORTGAGE BANKERS
1st & 2nd MTGS, FHA, VA

Gary C. Christensen, President

1-800-767-3323-Office

1-800-678-8738-Nationwide Pager

1-609-238-3030-Nationwide Cell Phone

New Jersey Fax-856-547-4722

S. J. Office #6 White Horse Pike, L. J. Haddon Heights, N. J. 08035

Attachment

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