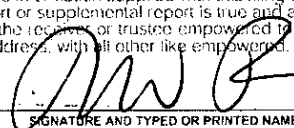


FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
CLERK OF STATE
DIVISION OF CORPORATION
02 JAN 23 AM 9:57

DOCUMENT # F99000000372			
1. Entity Name SIB Mortgage Corp.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 1250 Route 28		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Branchburg NJ		City & State	
Zip 08876	Country Somerset	Zip	Country
4. FEI Number 13-4027208		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name CT Corporation Systems			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
City Plantation		FL	Zip Code 33324
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 re-registering) DATE:			
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐		January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 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	President/CEO Richard W. Payne, III 3 Sugar Maple Row Chester, NJ 07930	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900004851339--5 -01/31/02--01076--021 *****150.00 *****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Exec. VP/CFO Ralph Picarillo 215 County Line Road Branchburg, NJ 08876	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Harry Doherty 86 Merrick Avenue Staten Island, NY 10304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director James Coyle 10 Parkview Place Staten Island, NY 10304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director John Brady 84 Davis Avenue Staten Island, NY 10304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Patricia Smith 15 Beach Street Staten Island, NY 10304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 person or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		1/15/02	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Richard W. Payne, III President/CEO			

CR2E034B (12/01)