

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
Aug 14, 2003 8:00 am
Secretary of State

04-10-2003 90129 018 ***150.00

DOCUMENT # F99000003214

1. Entity Name
SYNOVUS MORTGAGE CORP.



Principal Place of Business
**800 SHADES CREEK PARKWAY
STE 350
BIRMINGHAM AL 35209**

Mailing Address
**800 SHADES CREEK PARKWAY
STE 350
BIRMINGHAM AL 35209**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **63-1113916**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FLEMING-SEVOR, CASSIE
601 NORTH MONROE STREET
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name
NATALIE BECK
Street Address (P.O. Box Number is Not Acceptable)
**3471 THOMASVILLE ROAD
TALLAHASSEE, FL 32309**
City
TALLAHASSEE FL Zip Code
32308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/13/03

FILE NOW! FEE IS \$150.00

After May 1, 2003, Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V ANTHONY, RICHARD E
800 SHADES CREEK PKWY, STE 350
BIRMINGHAM AL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PF MARK G. HOLLADAY
P O BOX 120
COLUMBUS, GA 31902-0120** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P BROUGHTON III, THOMAS A
800 SHADES CREEK PKWY, STE 350
BIRMINGHAM AL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P FREDERICK D JEFFERSON
101 SOUTH CRAWFORD STREET
THOMASVILLE, GA 31799** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P MELTON, STEPHEN A
800 SHADES CREEK PKWY, STE 350
BIRMINGHAM AL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P JAMES L LABOON, JR
124 EAST HANCOCK AVENUE
ATHENS, GA 30601** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P PADALINO, MICHAEL L
800 SHADES CREEK PKWY, STE 350
BIRMINGHAM AL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P TEEL, GORDON R
800 SHADES CREEK PKWY, STE 350
BIRMINGHAM AL** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P GREEN, FRED L III
800 SHADES CRED PKWY STE 350
BIRMINGHAM AL** ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATALIE BECK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/003
Date

205-874-1414
Daytime Phone #

CR2E034 (10/02)