2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 12, 2001 8:00 am Secretary of State DOCUMENT # F99000003710 1. Entity Name GLENLAKE FINANCIAL CORP. 05-12-2001 90030 032 ***150.00 Principal Place of Business Mailing Address 55 GLENLAKE PARKWAY NE 55 GLENLAKE PARKWAY NE ATLANTA GA 30328 ATLANTA GA 30328 000493192. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 58-2491515 Not Applicable \$8.75 Additional Country 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 Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change X Addition Delete TITLE TITLE Michael D. Plourde HITCHCOX, WILLIAM C NAME NAME 55 Glenlake Parkusay NE STREET ADDRESS STREET ADDRESS 570 VALLEY HALL DR. CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30350 Atlanta, GA 30328 ☐ Addition Change TITLE Delete TITLE BERNABUCCCI, ROBERT J NAME NAME STREET ADDRESS 625 KENSINGTON FARMS DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALPHARETTA GA 30004 TITLE Change Addition Delete TITI F Phillip W. Chritton HARRISON, CATHERINE B NAME NAME 55 Glenlake Parkway DE STREET ADDRESS 421 SUPERIOR AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DECATUR GA 30030** Atlanta, GA 30328 Change Addition Delete TITLE TITLE MOUNTS, L. DAVID NAME NAME michael G Bryant 3925 RIVER LANDING WAY STREET ADDRESS STREET ADDRESS 55 Glenlaki Parkupay De CITY-ST-ZIP ATLANTA GA 30350 CITY-ST-ZIP AT, AS ☐ Change 🔀 Addition TITLE ■ Delete TITLE Eugene A. Pica BEYSTEHNER, JOHN J NAME NAME 55 Glenlake Parkesay NE STREET ADDRESS 1023 CHERBURY LN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ALPHARETTA GA 30022 Atlanta GA 3032X ASAT Change ☐ Addition TITLE TITLE ☐ Delete AGRESTA, MAURICE M NAME NAME 10265 BRIER MILL CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALPHARETTA GA 30022 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 action of the receiver o

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