

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G45618**

1. Entity Name

**LANDIS MORTGAGE FINANCING, INC.**

**FILED**  
**Aug 10, 2000 8:00 am**  
**Secretary of State**

08-10-2000 90009 036 \*\*\*150.00

Principal Place of Business

**7320 GRIFFIN RD. STE 211**  
**DAVIE FL 33314**

Mailing Address

**7320 GRIFFIN RD. STE 211**  
**DAVIE FL 33314**

**A0072335**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**3363 Sheridan ST**  
Suite, Apt. #, etc.  
**Suite # 205**

3. Mailing Address

**1301 Pierce ST**  
Suite, Apt. #, etc.

City & State

**Hollywood FL**

City & State

**Hollywood FL**

4. FEI Number

**59-2316200**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33021**

**Broward**

**33019**

**Broward**

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANDIS, STEVEN**  
**7320 GRIFFIN ROAD**  
**STE 211**  
**DAVIE FL 33314**

Name

**MARCEA LANDIS**

Street Address (P.O. Box Number is Not Acceptable)

**1301 PIERCE ST**

**Hollywood FL 33019**

City

**FL**

Zip Code

**33019**

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

*Marcia Landis Pres.* **MARCEA LANDIS**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**8/7/2000**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**

**After SEPTEMBER 13, 2000 Min. will be \$750.00**

**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPTS</b> <b>LANDIS, MARCIA</b> <b>7320 GRIFFIN RD. STE 211</b> <b>DAVIE FL</b> <i>3363 Sheridan ST Suite 205 Hollywood FL 33021</i>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>LANDIS, STEVE</b> <b>7320 GRIFFIN RD, #211</b> <b>DAVIE FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ROJAS, ANA M</b> <b>7320 GRIFFIN ROAD, STE 211</b> <b>DAVIE FL 33314</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BIGBIE, CINDY</b> <b>7320 GRIFFIN ROAD, STE 211</b> <b>DAVIE FL 33314</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*Marcia Landis* **MARCEA LANDIS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8/7/2000**

Date

**954-921-6600**

Daytime Phone #

CR2E034 (5/00)

Attachment Doc# G45618  
A0078335

**Landis Mortgage financing, Inc.**  
**3363 Sheridan Street Ste.#205**  
**Hollywood Fl. 33021**

August 8, 2000  
Florida Dept. Of State  
Division of Corporations  
P.O.Box 6327  
Tallahassee, Fl. 323114

To whom it may concern,

Subject: Late filling fee

At the end of December 1999 two of the corporate officers unexpectedly left the corporation. This created great turmoil in the company. One of the officers was in charge of administration and bill paying.

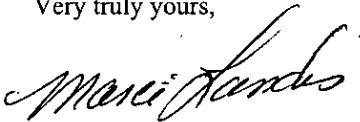
Due to the sudden changes in the organization I was forced to scale down and relocate the office. (See new address above) It seems as though the original notice never found its way to the new address. This segment of the business is new to me and I was unaware of this filing fee until I received this second notice.

I am asking, please, for some consideration in this matter. We have filed timely for the past seventeen years. Right now this added expense will be a great hardship to the company.

I am enclosing the fee of \$150.00 and asking for help this one time.  
I hope I will receive an answer ASAP as time is of the essence.

I am thanking you in advance for your consideration.

Very truly yours,



Marci Landis