

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J97699**

1. Entity Name

TREASURE COAST MORTGAGE CORPORATION**FILED**
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90008 011 ***150.00

950990



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1839 SE PORT ST LUCIE BLVD
PORT ST. LUCIE FL 34952**1839 SE PORT ST LUCIE BLVD**
PORT ST. LUCIE FL 34952-5529

2. Principal Place of Business

3104 SE Overbrook Dr.

3. Mailing Address

P.O. Box 7355

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Port St. Lucie, FL 34952

City & State

Port St. Lucie, FL 34952-5529

4. FEI Number

59-2852387

Applied For

Not Applicable

Zip
34952Country
USA

Zip

34985-7355Country
USA5. Certificate of Status Desired ☐**\$8.75 Additional**
Fees Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TIERNEY, STEPHEN
311 S. 2ND ST.
FT. PIERCE FL 34950

Name

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

City

FL

Zip Code

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 reinstating)

DATE

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 \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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
VPS
SMITH, YVONNE E ☐ Delete
1839 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE FL 34952TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
3104 SE Overbrook Dr.
Port St. Lucie, FL 34952TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
OLDFIELD, RICHARD J. ☐ Delete
1839 SE PORT ST LUCIE BLVD
PORT ST. LUCIE FL 34952TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
3104 SE Overbrook Dr.
Port St. Lucie, FL 34952TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Yvonne E. Smith V.P.**04/21/00****561-337-2866**

Date

Daytime Phone #

CR2E034 (9/99)