## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# L01000007403

Entity Name: MAXAMILLION MORTGAGE, LLC

Mar 07, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1457 BAYTOWNE AVE 1457 BAYTOWNE AVE DESTIN, FL 32541 DESTIN, FL 32550 **Current Mailing Address: New Mailing Address:** 1457 BAYTOWNE AVE DESTIN, FL 32541 FEI Number: 01-0592884 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MASTERS, PAMELA R 648 OCEAN SHORE BLVD. ORMOND BEACH, FL 32176 US 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS:** ADDITIONS/CHANGES: () Delete ( ) Change (X) Addition SCOTHORN, STEWART D PRES Name: Name: Address: Address: 1457 BAYTOWNE AVE E City-St-Zip: City-St-Zip: DESTIN, FL 32550 US Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: SCOTHORN, STEWART D PRES Address: Address: 1457 BAYTOWNE AVE E City-St-Zip: City-St-Zip: DESTIN, FL 32550 US Title: () Delete Title: MGRM ( ) Change (X) Addition SCOTHORN, STEWART D PRES Name: Name: 1457 BAYTOWNE AVE E Address: Address: City-St-Zip: City-St-Zip: DESTIN, FL 32550 US Title: () Delete Title: MGRM ( ) Change (X) Addition Name: Name: SCOTHORN, STEWART D PRES 1457 BAYTOWNE AVE E Address: Address: City-St-Zip: City-St-Zip: DESTIN, FL 32550 US Title: () Delete Title: ( ) Change (X) Addition BLANTON, GLYNDA G VP Name: Name: 1457 BAYTOWNE AVE E Address: Address: City-St-Zip: City-St-Zip: DESTIN, FL 32550 US Title: () Delete Title: ( ) Change (X) Addition SCOTHORN, STEWART D PRES Name: Name: Address: Address: 1457 BAYTOWNE AVE E DESTIN, FL 32550 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEWART D. SCOTHORN MGRM 03/07/2002