

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000009852

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: OLYMPIA MORTGAGE COMPANY, L.L.C.

Current Principal Place of Business:

1711 SE 10TH AVE.
CAPE CORAL, FL 33990

New Principal Place of Business:

455 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

Current Mailing Address:

1711 SE 10TH AVE.
CAPE CORAL, FL 33990

New Mailing Address:

455 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

FEI Number: 65-1117852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNELL, DON
1711 SE 10TH AVE.
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

SCHNELL, DON A
1711 SE 10TH AVE.
CAPE CORAL, FL 33990 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: DON A. SCHNELL

04/30/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SANVIDGE, DAVID
Address: 5513 HARBOUR CIRCLE
City-St-Zip: CAPE CORAL, FL

Title: MGRM () Delete
Name: SCHNELL, DON
Address: 1711 SE 10TH AVENUE
City-St-Zip: CAPE CORAL, FL

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SANVIDGE, DAVID
Address: 5513 HARBOUR CIRCLE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGRM (X) Change () Addition
Name: SCHNELL, DON
Address: 1711 SE 10TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

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: DON A. SCHNELL

MGRM

04/30/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date