## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

(9)

U.S. MORTGAGE LENDERS, INC.

|--|--|

**FILED** 

May 05 1998 8:00am

Secretary of State

Mailino Address

Principal Plac	al Place of Business Mailing Address							
64 BOW CIR			USINESS PARK PL	ACE				
HILTON HEAD US	ISLAND SC 29928	JENSEN BEA	ACH FL 34957			DO NOT WRITE IN	THIS SDACE	
00		US				3. Date Incorporated or Qualified	THIS SPACE	
						01/02/1990		ı
	lace of Business	2a. Mailing A	ddress			4. FEI Number		Applied For
21 1282	NE Business Park P	1. [26]				93-0925542		Not Applicable
Suite, Apt.	#, etc.	Suite, Apl	l. #, etc.			5. Certificate of Status Desired		5 Additional Regulred
City & State	θ	City & Sta	ate			6. Election Campaign Financing		00 May Be
_ `	en Beach, FL 28					Trust Fund Contribution	<b>-</b>	ed to Fees
Zip	Country	Žip		Country	,	8. This corporation owes or has paid t	ne current year	Intangible
24 34957	25 Martin	29	30			Personal Property Tax due June 30.		☐ No
	9. Name and Address of Curre	ent Registered Age	nt			10. Name and Address of New Regis	ered Agent	
	UNTT, JENNIFER K	_		81	Name			
	32 N.E. BUSINESS PARK PLAC	E		82	Street Ad	Idress (P.O. Box Number is Not Acceptable)	<del></del>	····
JE1	NSEN BEACH FL 34957							
				83				
				84	City		85 Z	ip Code
					- 7			`
11. Pursuant	to the provisions of Sections 607.05	502 and 607 1508, F	lorida Statutes, th	e abov	e-named co	orporation submits this statement for the purpration's board of directors. I hereby accept the	ose of changing	g its registered
agent. I a	m familiar with, and accept the obti	gations of, Section 6	07.0505, Florida	Statute	s.	anon's board of directors, Thereby accept to	е арропилен	as registered
SIGNATURE				<del></del>				
12.	Signature typed or printed name of registered a	igent and title it applicable ND DIRECTORS		stered Ag	vni signature req	ADDITIONS/CHANGES TO OFFICER	AND DIRECT	OPS IN 12
TITLE	S OFFICERS A			I.1 TITLE		ADDITIONS/CHANGES TO OFFICER	Chang	
NAME	KEYES, NANCY	L		1,2 NAME				
STREET ADDRESS	1282 N.E. BUSINESS PARK	PLACE			ADDRESS			
CITY-ST-ZIP	JENSEN BEACH FL			1.4 CITY - S			•	
TITLE	PD			2.1 TITLE	1-211		Chang	e Addition
NAME	GAUNT, JENNIFER	<del></del>	1	2.2 NAME	Ì			_
STREET ADDRESS	1282 NE BUSINESS PARK I	PL			ADDRESS			
CITY-ST-ZIP	JENSEN BCH FL			2.4 CITY				
TITLE				3.1 TITLE	J. L.		Chang	e Addition
NAME				3 2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP			1	3.4. CITY -	ĭ			Ì
TITLE				I.1 TITLE			☐ Chang	e Addition
NAME			1 .	I. 2 NAME				
STREET ADDRESS			1.	I.3 STREET	ADDRESS			
CITY-ST-ZIP				1.4 CITY - S	T-ZIP			
TITLE			DELETE :	i.1 TITLE			Chang	e 🔲 Addition
NAME			]	5.2 NAME	Ì			ſ
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY-S	iT - ZIP			
TITLE			·	5.1 TITLE			☐ Chang	e 🔲 Addition
NAME				3.2 NAME				İ
STREET ADDRESS				S.3 STREET	ADDRESS			
CITY-ST-ZIP			1	5.4 CITY-5	I - <b>Z</b> IP			
	<del></del>	····					- 11	

Thereby 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 annual report or supplemental annual 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 comparation of the receiver or fursited empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, over an attaction of the receiver or fursited empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, over an attaction of the receiver or fursite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in