

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 JUL 17 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000002038

1. Entity Name
SERVICE FIRST MORTGAGE, L.C.

Principal Place of Business Mailing Address
1900 CORPORATE BLVD., SUITE 410-WEST TOWER 1900 CORPORATE BLVD., SUITE 410-WEST TOWER
BOCA RATON FL 33431 BOCA RATON FL 33431

2. Principal Place of Business 3. Mailing Address
11575 Heron Bay Blvd 11575 Heron Bay Blvd.

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 300 Suite 300

City & State City & State
Coral Springs, FL Coral Springs, FL

Zip Country Zip Country
33076 USA 33076 USA

4. FEI Number Applied For
65-0908738 Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

TRAPANI, CHRISTOPHER M ESQ.
BRINKLEY, MCNERNEY, MORGAN, ET AL
200 EAST LAS OLAS BLVD., STE. 1800
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME MONROE, JOHN
STREET ADDRESS 1900 CORPORATE BLVD., SUITE 410-WEST TOWER
CITY-ST-ZIP BOCA RATON FL 33431

TITLE MGR ☐ Delete
NAME MAGER, SCOTT
STREET ADDRESS 1900 CORPORATE BLVD., SUITE 410-WEST TOWER
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11575 Heron Bay Blvd., Suite 300
CITY-ST-ZIP Coral Springs, FL 33076

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11575 Heron Bay Blvd., Suite 300
CITY-ST-ZIP Coral Springs, FL 33076

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800003337138--8
CITY-ST-ZIP -07/26/00--01092--019

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS *****55.00 *****55.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my 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:

SIGNATURE REQUIRED John S. Monroe

7/12/00 954-752-1411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date Daytime Phone #

CR2:083 (5/00)