2001 UNIFORM BUSINESS REPORT (UBR)

DOCUI	MENT# M	97000000288		•					
,	RION MORTGAGE L	LC				FILEC)		
,						OLMAR 16 PM	ነ ኔ፡ 26		
Principal Plac	e of Business	Mailing Address	failing Address			SECRETARY OF STATE TULLAHASSEE, FLORIDA			
C/O WM MORTGAGE SERVICING 1773 WILTSHIRE VILLAGE DR WELLINGTON FL 33414		1773 WILTSHIRE VILLA	C/O WM MORTGAGE SERVICING 1773 WILTSHIRE VILLAGE DR WELLINGTON FL 33414					 Bi 1818 1811 1881	
2. Principal P	lace of Business	3. Mailing Address							
·		Suite, Apt. #, etc.	.		_	DO NOT WRITE	IN THIS SPACE		
								Applied For	
City & State		City & State	ity & State		4. FEIN	13-3955122		lot Applicable	
Zip	Country	Zip	Count	Country		ficate of Status Desired	\$5.00 A		
	6. Name and Address o	1 Current Registered Agent			7. Name	e and Address of New Reg	istered Agent		
				Name					
1200 SOL	Poration System Jth Pine Island Road		·	Street Address (P.O. Box Number is Not Acceptable)					
PLANTAT	ION FL 33324				 -		FL Zip Co	de	
8 The above	named entity submits this sta	atement for the purpose of changing	its registere	d office or regis	stered agent,	or both, in the State of Florid	da.		
		5 0	J	_	-	•			
SIGNATURE .	Signature, typed or printed name of reg	istered agent and title if applicable. (Ne	OTE: Registered	Agent signature requ	uired when reinstati	ng)	DATE		
		FILE	NOW!!! F	EE IS \$50.0	00				
,		Make Check I	Payable to	Departmen	t of State				
9.	MANAGIN	NG MEMBERS/MEMBERS	10.			ADDITIONS/C	HANGES		
TITLE NAME STREET ADDRESS	MGR SHERRY, MICHAEL 1773 WILTSHIRE VILLA			T ADDRESS ST-ZIP		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
CITY-ST-ZIP	WELLINGTON FL 33414	, Delete	TITLE	···		-113/26/01	UTU OF Charly	13 □ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		/ Delete	NAME STREE			******55	.00 ****** 	ວຽ.ປັນ	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	■ ·				_ Change	☐ Addition ³	
TITLE NAME STREET ADDRESS		☐ Delete		I			☐ Change	☐ Addition	
TITLE NAME		☐ Delete	TITLE				Change	Addition	
STREET ADDRESS CITY-ST-ZIP				ST-ZIP		•			
TITLÉ NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE	I			☐ Change	☐ Addition	
CITY-ST-ZIP			CITY-	ST-ZIP				.,	
indicated	on this report is true and acc	oplied with this filing does not qualify curate and that my signature shall hav r or trustee empowered to execute th	ve the same	legal effect as	if made unde	r oath: that I am a manadir	urther certify that the ng member or manas	e information ger of the	