

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90028 020 ***150.00

DOCUMENT # P00000036512

1. Entity Name

AMBITION MORTGAGE CORPORATION



Principal Place of Business

1515 SILVER SPRINGS BLVD
#139
OCALA FL 34470

Mailing Address

1515 SILVER SPRINGS BLVD
#139
OCALA FL 34470

2. Principal Place of Business

1515 Silver Springs Blvd
Suite, Apt. #, etc.

#121

City & State

Ocala Florida

Zip
34470

Country
Marion

3. Mailing Address

1515 Silver Springs Blvd
Suite, Apt. #, etc.

#121

City & State

Ocala Florida

Zip
34470

Country
Marion



MOORE

CR2E034 (11/03)

4. FEI Number

59-3587192

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELLEY, ALICE D
13641 NE 238TH COURT
FORT MC COY FL 32134

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME KELLEY, ALICE ☐ Delete
STREET ADDRESS 3761 DENOLEBERRY DR
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE VP
NAME LAWRENCE, BERYL ☒ Delete
STREET ADDRESS 3761 PENDLEBURY DR
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME KELLEY, ALICE
STREET ADDRESS 13641 NE 238TH CT
CITY-ST-ZIP SALT SPRINGS, FL 32134-6003

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

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

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

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

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

12. 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 or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/04 32309995