

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

0541609 AV

DOCUMENT # P00000041602

1. Entity Name

BANKS MORTGAGE CORPORATION

02-04-2002 90117 039 ***150.00

Principal Place of Business

28870 US 19 NORTH
 300
 CLEARWATER FL 33761

Mailing Address

3641 AMELIA WAY
 PALM HARBOR FL 34684



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8701 Torchwood Dr.

Suite, Apt. #, etc.

3. Mailing Address

8701 Torchwood Dr.

Suite, Apt. #, etc.

City & State

New Port Richey, FL

City & State

New Port Richey, FL

Zip

34655

Country

USA

Zip

34655

Country

USA

4. FEI Number

59-3640672

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MCNAMARA, THOMAS P

2909 BAY TO BAY BLVD., STE. 309

TAMPA FL 33629

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

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME D
 STREET ADDRESS BANKS, DEBRA L
 CITY-ST-ZIP 3641 AMELIA WAY
 PALM HARBOR FL 34684

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME D
 STREET ADDRESS DEBRA L. BANKS-WAZ
 CITY-ST-ZIP 8701 Torchwood Dr.
 New Port Richey, FL 34655

TITLE ☐ Change ☒ Addition
 NAME VP
 STREET ADDRESS Tamara L. Zeph
 CITY-ST-ZIP 3243 Masters Dr.
 Clearwater, FL 33761

TITLE ☐ Change ☒ Addition
 NAME S
 STREET ADDRESS Richard H. Waz
 CITY-ST-ZIP 8701 Torchwood Dr.
 New Port Richey, FL 34655

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

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

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

13. 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 11 or Block 12 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
 DEBRA L. BANKS 1/6/02 727-376-7099

Date

Daytime Phone #

CR2E034 (9/01)