

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000066947

1. Entity Name
PEOPLE'S HOME MORTGAGE INC.

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90283 028 ***150.00

Principal Place of Business
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470

Mailing Address
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470

2. Principal Place of Business
11328-2 OKEECHOBEE BLVD
Suite, Apt. #, etc.

3. Mailing Address
11328-2 OKEECHOBEE BLVD
Suite, Apt. #, etc.

City & State
ROYAL PALM BEACH, FL
Zip
33411
Country
PALM BEACH

City & State
ROYAL PALM BEACH, FL
Zip
33411
Country
PALM BEACH

4. FEI Number
65-1024934
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
PAGANELLO, GARY
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470

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 _____ (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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PAGANELLO, MARLENE A
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470
VP
PAGANELLO, GARY
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470
ST
PAGANELLO, MARLENE A
16887 WEST GLASGOW DRIVE
LOXAHATCHEE FL 33470

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition
Change Addition
Change Addition
Change Addition
Change Addition
Change Addition

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: Marlene A. Paganello 2/27/2001 561-333-2223
MARLENE A. PAGANELLO Date Daytime Phone #

CR2E034 (10/00)