

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000084563

1. Entity Name

ABSOLUTE ADVANTAGE HOME LOANS, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90343 019 ***150.00

Principal Place of Business

2132 HENTZ DRIVE
PANAMA CITY FL 32405

Mailing Address

2132 HENTZ DRIVE
PANAMA CITY FL 32405

2. Principal Place of Business

2111 Thomas Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite 101

City & State

Panama City Bch, FL

Zip

Country

32408

USA

Zip

Country

4. F.I. Number

59-3669516

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HESS, BRIAN D
9108 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32407

7. Name and Address of New Registered Agent

Name

James E. HALL

Street Address (P.O. Box Number is Not Acceptable)

2132 HENTZ DRIVE
Panama City FL 32405

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 of principal or prior name of registered agent and agent of application

(NOTE: Registered Agent signature required when re-registering)

DATE

James E. Hall

President

3-20-01

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	D	☐ Delete
NAME	HALL, JAMES E	
STREET ADDRESS	2132 HENTZ DRIVE	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	D	☒ Delete
NAME	WADE, JOSEPH E	
STREET ADDRESS	21400 CARIBBEAN LANE	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32413	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		
STREET ADDRESS		
CITY-ST-ZIP		
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)(f), 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 Book 11 or Book 12, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James E. Hall

James E. HALL

3-20-01

850-215-6511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Out to Phone #

CR2E034 (10/00)