2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000094627

Entity Name: SOUTHWOOD MORTGAGE, INC.

Apr 23, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1650 PRUDENTIAL DRIVE SUITE 400 245 RIVERSIDE AVENUE JACKSONVILLE, FL 32207

SUITE 500

JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

1650 PRUDENTIAL DRIVE SUITE 400 245 RIVERSIDE AVENUE ATTN. LEGAL DEPT. SUITE 500--ATTN. LEGAL DEPT.

JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32202

FEI Number: 59-3691558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PAINE, LAWRENCE PAINE, LAWRENCE 1650 PRUDENTIAL DRIVE 245 RIVERSIDE AVENUE SUITE 400 SUITE 500 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32207

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:

04/23/2003 Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

PAINE, LAWRENCE PAINE, LAWRENCE Name: Name:

1650 PRUDENTIAL DRIVE SUITE 400 245 RIVERSIDE AVENUE SUITE 500 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32202 US

DP

() Delete Title: (X) Change () Addition Title: Name: MOTTA, JAMES D Name: MOTTA, JAMES D

1650 PRUDENTIAL DRIVE SUITE 400 7900 GLADES ROAD SUITE 200 Address: Address:

JACKSONVILLE, FL 32207 US BOCA RATON, FL 32202 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: SVPT () Delete DVT REGAN, MICHAEL N REGAN, MICHAEL N Name: Name:

1650 PRUDENTIAL DRIVE SUITE 400 245 RIVERSIDE AVENUE SUITE 500 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32202 US

Title: () Delete Title: AS (X) Change () Addition WHITLATCH, SUSAN G WHITLATCH, SUSAN G

Name: Name: Address: 1650 PRUDENTIAL DRIVE SUITE 400 Address: 245 RIVERSIDE AVENUE SUITE 500

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32202 US

Title: (X) Delete Title: () Change () Addition

PAINE, LAWRENCE Name: Name: 1650 PRUDENTIAL DRIVE SUITE 400 Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN G. WHITLATCH AS 04/23/2003