

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91333 029 ***150.00

DOCUMENT # P00000094982

1. Entity Name

N.S.I. Mortgage, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

710 Oakfield Drive

3. Mailing Address

710 Oakfield Drive

Suite, Apt. #, etc.

Suite 145

Suite, Apt. #, etc.

Suite 145

City & State

Brandon, FL

City & State

Brandon, FL

Zip

33511

Country

USA

Zip

33511

Country

USA

4. FEI Number

59-3675311

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

DANIEL HICKS

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

2324 TIMBERGROVE DRIVE

City

VALRICO

FL

Zip Code

33594

**DO NOT WRITE
IN THIS SPACE**

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

Dan Hicks

4/30/02

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	D DANIEL HICKS 2324 TIMBERGROVE DRIVE VALRICO, FL 33594	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 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 #

Dan Hicks

4/30/02

CR2E034B (12/01)