## **2001 UNIFORM BUSINESS REPORT (UBR)**

#### Sep 11, 2001 8:00 am Secretary of State **DOCUMENT #** P00000099312 09-11-2001 90008 045 \*\*\*150.00 PREMIUM HOME MORTGAGE CORP. Principal Place of Business Mailing Address 13575 - 58TH STREET N. #145 13575 - 58TH STREET N. #145 **CLEARWATER FL 33760** CLEARWATER FL 33760 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FFI Number Applied For Not Applicable Country Certificate of Status Desired 7. Name and Address of New Registered Agent SCOTT: DOYLE---Street Address (P.O. Box Number is Not Acceptable) 13575 - 58TH STREET N., #145 **CLEARWATER FL 33760** 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 (NOTE: Registered Agent signature required when rel FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Make Check Payable to Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete mle Addition ☐ Change NAME NAME STREET ADDRESS STREET ANDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete ITTLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME STREET ADORESS 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 cath; that I am an officer or director of the original report 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.

**FILED** 

08-08-01 727-530-1282

# PREMIUM HOME MORTGAGE CORP.

Attachment # 1000000993/2 84<u>1</u>

2574 BELLEAIR ROAD CLEARWATER, FL 33764 727-530-1282 727-530-1291



### ANNUAL REPORT LETTER

### PERTAINING TO MY ANNUAL REPORT FILING, I WAS MOVING TO A NEW

LOCATION, THE REPORT WAS PUT IN ONE OF MY MOVING BOXES, INSTEAD OF
THE OUTGOING MAIL BOX. I AM NOW FORWARDING THE REPORT TO YOU ALONG
WITH THE \$150.00 ANNUAL REPORT FEE. PLEASE CALL DOYLE AT 727-503-1282
IF YOU NEED ANY INFORMATION

SINCERELY,

DOYLE SCOTT