

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 19, 2003 8:00 am**  
**Secretary of State**

03-19-2003 90093 012 \*\*\*150.00

**DOCUMENT # P00000105116**

**1. Entity Name**  
**EQUITY FUNDING MORTGAGE CORPORATION**



**Principal Place of Business**  
**14255 US HWY 1, SUITE #207**  
**JUNO BEACH FL 33408**

**Mailing Address**  
**14255 US HWY 1, SUITE #207**  
**JUNO BEACH FL 33408**

**2. Principal Place of Business**

**14265 U.S. Hwy 1**  
Suite, Apt. #, etc.

**3. Mailing Address**

**14265 U.S. Hwy 1**  
Suite, Apt. #, etc.

**City & State**  
**Juno Beach FL**

**City & State**  
**Juno Beach**

**4. FEI Number** **65-1053487**

**Applied For**  
**Not Applicable**

**Zip** **33408** **Country** **U.S.A.**

**Zip** **FL** **Country** **U.S.A.**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**MALLORY, EARL K**  
**1907 COMMERCE LANE**  
**SUITE 104**  
**JUPITER FL 33468-8858**

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>P</b> <b>CUNNINGHAM, DENNIS C</b> <b>14255 US HWY 1, SUITE #207</b> <b>JUNO BEACH FL 33408</b> <input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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**12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Dennis C. Cunningham** **561-691-3211**

**3/19/2003**

**Daytime Phone #**

CR2E034 (10/02)