

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90321 010 ***150.00

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DOCUMENT # P01000058497

1. Entity Name
MAGNOLIA MORTGAGE GROUP, INC.



Principal Place of Business
**40347 US HWY 19 N
223
TARPON SPRINGS FL 34689**

Mailing Address
**POST OFFICE BOX 15204
CLEARWATER FL 33766**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3725072**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GENTRY, BOBBY R
40347 US HWY. 19 N STE 223
TARPON SPRINGS FL 34689**

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)

**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
Trust Fund Contribution, ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
NAME **GENTRY, BOBBY R**
STREET ADDRESS **3750 WINNERS CIRCLE #304**
CITY-ST-ZIP **PALM HARBOR FL 34684** *Change address*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Bobby Gentry**
NAME **580 Calibre Downs Lane #2505**
STREET ADDRESS **Palm Harbor FL 34684**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does indicate on this report or supplemental report is true and acc of the corporation or the receiver or trustee empowered to ex changed, or on an attachment with an address, with all other I

Bobby Gentry
Magnolia Mortgage Group, Inc.
40347 US Hwy. 19 N Ste 223
Tarpon Springs FL 34689
727-938-6778 727-938-6667 fax
bgentry@magnoliamortgagegroup.com

I, Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director and that my name appears in Block 10 or Block 11 if

SIGNATURE: *Bobby Gentry*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-03 727 938-6778
Date Daytime Phone #

CR2E034 (10/02)