

FILED

03 JUL 28 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000075868																											
1. Entity Name HOMESENSE MORTGAGE CORPORATION																											
Principal Place of Business 10004 BENNINGTON DRIVE TAMPA, FL 33626		Mailing Address 10004 BENNINGTON DRIVE TAMPA, FL 33626																									
2. Principal Place of Business 3001 NORTH ROCKY POINT DR.		3. Mailing Address 3001 NORTH ROCKY POINT DR.																									
Suite, Apt. #, etc. SUITE 200		Suite, Apt. #, etc. SUITE 200																									
City & State TAMPA, FLORIDA		City & State TAMPA, FLORIDA																									
Zip 33607	Country	Zip 33607	Country																								
6. Name and Address of Current Registered Agent MCCLELLAN, JESS 10004 BENNINGTON DRIVE TAMPA, FL 33626		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3001 NORTH ROCKY POINT DR. SUITE 200 City TAMPA FL Zip Code 33607																									
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 JESS MCCLELLAN DATE 7/01/03 Signature, typed or printed name of registered agent and date if applicable. (Typed Registered Agent signature required when submitting)																											
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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, and all other like empowered.																											
SIGNATURE: JESS MCCLELLAN		Date 7/1/03 813-854-9911																									



* CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3735621** Applied For ☐ Not Applicable ☒5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

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

SUITE 200City **TAMPA**

FL

Zip Code

33607

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SIGNATURE **JESS MCCLELLAN**Signature, typed or printed name of registered agent and date if applicable.(Typed Registered Agent signature required when submitting)

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SIGNATURE: **JESS MCCLELLAN**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #