

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90188 010 ***158.75

DOCUMENT # P01000096255

1. Entity Name
TAURUS MORTGAGE GROUP, INC.



Principal Place of Business
7610 WINGING WAY DRIVE
TAMPA FL 33615

Mailing Address
7610 WINGING WAY DRIVE
TAMPA FL 33615



2. Principal Place of Business

7520 W. WATERS AVE

3. Mailing Address

7520 W. WATERS AVE

Suite, Apt. #, etc.

SUITE 7

Suite, Apt. #, etc.

SUITE 7

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33615

Country

U.S.

Zip

33615

Country

U.S.

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 52-2344942

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOHIMER, JAMES E
7610 WINGING WAY DRIVE
TAMPA FL 33615

7. Name and Address of New Registered Agent

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
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME HOHIMER, JAMES E
STREET ADDRESS 7610 WINGING WAY DR
CITY-ST-ZIP TAMPA FL 33615

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

TITLE EV ☐ Delete
NAME WOODSON, L. BERRY
STREET ADDRESS 7610 WINGING WAY DR
CITY-ST-ZIP TAMPA FL 33615

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

TITLE TD ☐ Delete
NAME KIRK, ROBERT F JR
STREET ADDRESS 7610 WINGING WAY DR
CITY-ST-ZIP TAMPA FL 33615

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

TITLE D ☐ Delete
NAME STEIMLE, ROGER L
STREET ADDRESS 7610 WINGING WAY DR
CITY-ST-ZIP TAMPA FL 33615

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES E. HOHIMER

1-20-03

(813) 890-0317

Date

Daytime Phone #

CR2E034 (10/02)