

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

FILED

03 OCT -6 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000097531

1. Entity Name

Westchase Mortgage Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2901 West Busch Blvd.

3. Mailing Address

2901 West Busch Blvd.

Suite, Apt. #, etc.

612

Suite, Apt. #, etc.

612

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33618

Country

Hillsborough

Zip

33618

Country

Hillsborough

4. FEI Number

59-3748379

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Booker Pickett

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

12909 S.W. 50th ST.

City

Miramar

FL

Zip Code

33027

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)

9/25/03

DATE

January 1 - May 1: Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	<u>President</u>
NAME	<u>Booker Pickett</u>
STREET ADDRESS	<u>12909 S.W. 50th ST.</u>
CITY-ST-ZIP	<u>Miramar, FL 33618</u>
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/03

Date

305 829-1982

Daytime Phone #

CR2E034B (12/02)



WESTCHASE

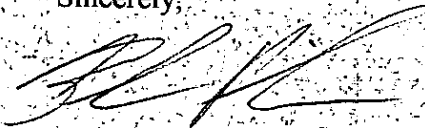
Mortgage

Licensed Mortgage Brokerage Business

To Whom It May Concern:

I want to apologize for not submitting this document (UBR form) to you by the required due date. It has just been brought to my attention that our status with the State is inactive because of my failure to submit this form. I know it's my responsibility to mail out the UBR form by June, and in all honesty I thought I took care of this earlier this year. We don't recall receiving any notices from the State that the UBR form and fee was still outstanding so, I assumed this was taken care of. Again I accept full responsibility for our actions or lack of actions for not submitting the UBR form properly. I can assure you that this will never happen again. It will be greatly appreciated if you accepted this check for \$150.00 and reinstated our license to active. Thank you for your thoughtfulness and understanding.

Sincerely,



Booker Pickett
President