

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90073 010 ***150.00

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1. Entity Name

APPROVED FINANCING INC.



Principal Place of Business

7 BUFFALO BILL PLACE
PALM COAST FL 32137

Mailing Address

7 BUFFALO BILL PLACE
PALM COAST FL 32137

2. Principal Place of Business

5 Boulder Rock Drive
Suite G
Palm Coast, FL
32137
Flagler, US

3. Mailing Address

5 Boulder Rock Dr.
Suite G
Palm Coast, FL
32137
USA



☒ CHECK HERE IF MAKING CHANGES

City & State

Palm Coast, FL

City & State

Palm Coast, FL

4. FEI Number

59-3752582

Applied For

Not Applicable

Zip

32137

Country

Flagler, US

Zip

32137

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOGUE, ROBERT J
7 BUFFALO BILL PLACE
PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name

Logue, Robert J

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

41 Saint Andrews Ct

City

Palm Coast

FL

Zip Code

32137

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

Robert J. Logue

4/2/03

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

TITLE D ☐ Delete
NAME LOGUE, ROBERT S
STREET ADDRESS 7 BUFFALO BILL PLACE
CITY-ST-ZIP PALM COAST FL 32137

TITLE D ☐ Delete
NAME LOGUE, LORI A
STREET ADDRESS 7 BUFFALO BILL PLACE
CITY-ST-ZIP PALM COAST FL 32137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Logue, Robert
STREET ADDRESS 41 Saint Andrews Ct
CITY-ST-ZIP Palm Coast FL 32137

TITLE D ☒ Change ☐ Addition
NAME Logue, Lori
STREET ADDRESS 41 Saint Andrews Ct
CITY-ST-ZIP Palm Coast FL 32137

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

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

TITLE ☐ Change ☐ Addition
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

4/2/03 386 447 2183

Date

Daytime Phone #

CR2E034 (10/02)