FILED
Mar 24, 2003 8:00 am
Secretary of State
03-07-2003 90118 037 ***158.75

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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000006119

1. Entity Name
CITY WIDE MORTGAGE RESOURCES, INC.

Principal Place of Business	Mailing Address
6006 FORTUNE PLACE APOLLO BEACH, FL 33572	6006 FORTUNE PLACE APOLLO BEACH, FL 33572

2. Principal Place of Business	3. Mailing Address
3110 Cherry Palm Dr	3110 Cherry Palm Dr
Suite, Apt. #, etc.: Suite 370	Suite, Apt. #, etc.: Suite 370
City & State: Tampa, Fl 33619	City & State: Tampa, Fl 33619
Zip: 33619 Country: U.S.	Zip: 33619 Country: U.S.

☒ CHECK HERE IF MAKING CHANGES

FEI Number: 30-0029233 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHNSON, IRIS J 11304 LEPRECHAUN DR. RIVERVIEW, FL 33569	Name: Johnson, Iris J Street Address (P.O. Box Number is Not Acceptable): 2549 Mason Oaks Drive City: Valrico FL Zip Code: 33594

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] DATE: 03/05/03
(Typed, hand or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President Benjamin C. Johnson Jr. 8104 Moccasin Trail Dr Riverview Fl, 33569 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Melissa D. Johnson 4107 Fallon C.T. Brandon Fl, 33511 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Of Treasurer ☐ Delete Ashley N. Janes 8104 Moccasin Trl Dr. Riverview Fl, 33569	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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] 03/05/03 813-740-8688
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Date — Daytime Phone #