

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000047948

FILED
May 27, 2003
Secretary of State

Entity Name: BEACHSIDE MORTGAGE, INC.

Current Principal Place of Business:

1639 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

1361 13TH AVE SOUTH
SUITE 245
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1639 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

1361 13TH AVE. SOUTH
SUITE 245
JACKSONVILLE BEACH, FL 32250

FEI Number: 27-0016608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHEALY, LARRY D
1639 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250

Name and Address of New Registered Agent:

SHEALY, LARRY D
1361 13TH AVE. SOUTH
SUITE 245
JACKSONVILLE BEACH, FL 32250

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.

SIGNATURE: LARRY D. SHEALY

05/27/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHEALY, LARRY D
Address: 1501 FIRST STREET
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: STD () Delete
Name: SHEALY, GAIL R
Address: 1501 FIRST STREET
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY D. SHEALY

PD

05/27/2003

Electronic Signature of Signing Officer or Director

Date