

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91781 004 ***150.00

0028843 AV

DOCUMENT # P02000049232

1. Entity Name

PERFORMANCE MORTGAGE GROUP, INC.



Principal Place of Business

4540 SOUTHSIDE BLVD STE 202
JACKSONVILLE FL 32216

Mailing Address

4540 SOUTHSIDE BLVD STE 202
JACKSONVILLE FL 32216

2. Principal Place of Business

2980 Hartley Rd

3. Mailing Address

2980 Hartley Rd.

Suite, Apt. #, etc.

Suite #5

Suite, Apt. #, etc.

Suite #5

City & State

JACKSONVILLE, FLA

City & State

JACKSONVILLE, FL

Zip

32257

Country

USA

Zip

32257

Country

USA

4. FEI Number

35-2167806

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

WHITE, W. HOWARD

4540 SOUTHSIDE BLVD STE 202
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name

BARRY B. AKIN

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

2980 HARTLEY RD. Suite #5

City

JACKSONVILLE, FLA

FL

Zip Code

32257

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

Barry B. Akin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/03

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
NAME WHITE, W HOWARD
STREET ADDRESS 4540 SOUTHSIDE BLVD STE 202
CITY-ST-ZIP JACKSONVILLE FL 32216 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D. P.S.T.
NAME BARRY B. AKIN
STREET ADDRESS 2980 Hartley Rd Suite 5
CITY-ST-ZIP JACKSONVILLE, FLA 32257 ☐ Change ☒ Addition

TITLE D. V.P.
NAME Gary D. Silverfield
STREET ADDRESS 4141 Southpoint Dr. East.
CITY-ST-ZIP JACKSONVILLE, FLA 32216 ☐ Change ☒ Addition

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

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

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

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

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:

Barry B. Akin BARRY B. AKIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/03

DATE

(904) 338-9152

DAYTIME PHONE #

CR2E034 (10/02)