

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0006460 AV

DOCUMENT # P02000062954

1. Entity Name  
YOUR MORTGAGE GROUP, INC.



FILED

04 JAN 29 PM 12:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
~~3400 Cherokee Ridge Trl.~~  
3701 CHARLES SAMUELS RD.  
TALLAHASSEE FL 32312

Mailing Address  
~~3400 Cherokee Ridge Trl.~~  
3701 CHARLES SAMUELS RD.  
TALLAHASSEE FL 32312

2. Principal Place of Business  
3400 CHEROKEE RIDGE  
Suite, Apt. #, etc. TL.

3. Mailing Address  
SAME  
Suite, Apt. #, etc.

REINSTATEMENT

☐ CHECK HERE IF MAKING CHANGES

03-04

City & State  
Tallahassee

City & State  
FL

4. FEI Number  
75-3068592

Applied For  
Not Applicable

Zip  
32312

Country  
LEON

Zip  
Country

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

6. Name and Address of Current Registered Agent

STEPHEN C. WILLIS, P.A.  
1407 E. PIEDMONT DR., SUITE B  
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name  
KENNY TIPPS  
Street Address (P.O. Box Number is Not Acceptable)  
3400 CHEROKEE RIDGE TRAIL  
City  
Tallahassee FL Zip Code  
32312

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 (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00  
After September 10, 2003 Fee will be \$750.00  
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 NAME STREET ADDRESS CITY-ST-ZIP	D TIPPS, KENNETH 3400 CHEROKEE RIDGE TRAIL TALLAHASSEE FL 32312	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	900028316929 02/06/04--01011--015 **308.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/04  
Date Daytime Phone #

CR2E034 (4/03)

To whom it may concern:

I haven't received my mail due to a divorce & property settlement. <sup>My check</sup> I'm asking for \$600. re-instatement fee to be waived. I haven't used Corp. as of yet, but plan to Mar. 1, 04. I am paying 300.00 for 2003 & 2004. Thank you very much for your consideration.

Ruby Dyer  
Your Mortgage Group, Inc.  
(850) 528-1309