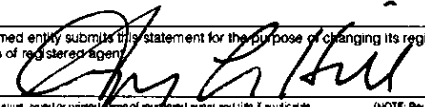
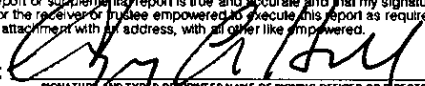


APPROVED
AND
FILED

03 JUL -8 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000079824			
1. Entity Name FAMILY HOME LENDING CORPORATION			
Principal Place of Business 2801 SW COLLEGE RD SUITE 5 OCALA, FL 34474		Mailing Address 2801 SW COLLEGE RD SUITE 5 OCALA, FL 34474	
2. Principal Place of Business 33 Old Kings Road North		3. Mailing Address 33 Old Kings Road North	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Palm Coast FL		City & State Palm Coast FL	
Zip 32137		Zip 32137	
Country USA		Country USA	
4. FEI Number 74-3054661		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent WEBER, MARY S HC2 BOX 690 OLD TOWN, FL 32680		7. Name and Address of New Registered Agent Name Gregory L. Hill Street Address (P.O. Box Number is Not Acceptable) 33 Old Kings Road North Suite 1 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  Gregory L. Hill DATE 06/26/2003 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.)			
FILE NOW!!!! FEE IS \$150.00 After May 13, 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	PD HILL, GREGORY L 1200 CELANDINE DR APEX, NC 27602 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 33 Old Kings Road North, Suite 1 Palm Coast, FL 32137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOWEN, THOMAS L 301 SWANBORO DR CARY, NC 27519 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 33 Old Kings Road North, Suite 1 Palm Coast, FL 32137
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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)(1), 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:  Gregory L. Hill DATE 06/26/2003 (386) Signature and typed or printed name of signing officer or director. Date Daytime Phone #			

CR20034 (10/02)

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06/30/03--01063--019 **\$50.00