

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

03-05-2003 90039 018 ***150.00

DOCUMENT # P02000123775

1. Entity Name
WYN STAR MORTGAGE, INC.



Principal Place of Business
**435 TREMINGHAM WAY
VENICE FL 34293**

Mailing Address
**435 TREMINGHAM WAY
VENICE FL 34293**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-4514101

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

7. Name and Address of New Registered Agent

**BELLE, MICHAEL J
2364 FRUITVILLE ROAD
SARASOTA FL 34237**

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete
**Secretary, Director
Thomas H. Sahrow
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Change ☐ Addition
**Vice Presdient, Director
Kathleen D. Sahrow
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Delete
**Treasurer
Thomas H. Sahrow
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Change ☐ Addition
**Vice President
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Delete
**Vice President
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Change ☐ Addition
**Vice President
435 Tremingham Way
Venice, Fl. 34293**

TITLE NAME ☐ Delete
**Vice Presdient
Holley A. Shaver
1042 Burning Oak Court
Venice, Fl. 34293**

TITLE NAME ☐ Change ☐ Addition
**Vice Presdient
Holley A. Shaver
1042 Burning Oak Court
Venice, Fl. 34293**

TITLE NAME ☐ Delete
**Director
Michael A. Brown
881 Julian Street
Winter Park, Fl. 32789**

TITLE NAME ☐ Change ☐ Addition
**Director
Michael A. Brown
881 Julian Street
Winter Park, Fl. 32789**

TITLE NAME ☐ Delete
**President
Michael A. Brown
881 Julian Street
Winter Park, Fl. 32789**

TITLE NAME ☐ Change ☐ Addition
**President
Michael A. Brown
881 Julian Street
Winter Park, Fl. 32789**

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/03

Date

407-647-2232

Daytime Phone #

CR2E034 (10/02)