

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 03, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P19590**1. Entity Name  
**MERCANTILE MORTGAGE COMPANY****Principal Place of Business**

8101 N HIGH ST # 380

COLUMBUS

43235

US

OH

**Mailing Address**

8101 N HIGH ST # 380

SUITE 180

COLUMBUS

43235

US

OH

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number****36-3570056**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**NOBLE MARK A  
2706 ALT. 19 NORTH STE 302

PALM HARBOR

34683

US

FL

**7. Name and Address of New Registered Agent**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

**04/03/2001**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ST ☐ Delete  
NAME LAISURE SHERRI K.  
STREET ADDRESS 2091 HAYES COURT  
CITY-ST-ZIP LEWIS CENTER OH 43035TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE PD ☐ Delete  
NAME SILVEOUS BRANT D.  
STREET ADDRESS 3416 OLENTANGY RIVER ROAD  
CITY-ST-ZIP DELAWARE OH 43015TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE VD ☐ Delete  
NAME NOBLE MARK A.  
STREET ADDRESS 1300 PLAYMOOR DRIVE  
CITY-ST-ZIP PALM HARBOR FL 34683TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE CD ☐ Delete  
NAME SILVEOUS C. DANIEL  
STREET ADDRESS 3410 OLENTANGY RIVER ROAD  
CITY-ST-ZIP DELAWARE OH 43015TITLE CD ☒ Change ☐ Addition  
NAME SILVEOUS ESTATE OF CDANIEL  
STREET ADDRESS 3410 OLENTANGY RIVER ROAD  
CITY-ST-ZIP DELAWARE OH 43015TITLE CD ☐ Delete  
NAME NOBLE RONALD B.  
STREET ADDRESS 684 STONEFIELD LOOP  
CITY-ST-ZIP HEATHROW FLTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: BRANT D. SILVEOUS**

PRES

04/03/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)