2001 UNIFORM BUSINESS REPORT (UBR)

Apr 02, 2001 8:00 am Secretary of State **DOCUMENT # P20463** INDEPENDENT MORTGAGE & REALTY CORPORATION 04-02-2001 90058 034 ***150.00 Principal Place of Business Mailing Address 1031 W MORSE BLVD 1031 W MORSE BLVD SUITE 300 SUITE 300 WINTER PARK FL 32789 WINTER PARK FL 32789 ИS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 31-1199359 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent... 7. Name and Address of New Registered Agent Name MOULTON, LESLEY Street Address (P.O. Box Number is Not Acceptable) 1031 W. MORSE BLVD. SUITE 300 WINTER PARK FL 32789 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE ☐ Addition BARNES, JAMES T., JR. NAME NAME STREET ADDRESS STREET ADDRESS 1031 W. MORSE BLVD. STE 300 CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL TITLE ☐ Delete TITLE MOULTON, LESLEY NAME STREET ADDRESS 1031 W MORSE BLVD #300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL TITLE= TITLE ☐ Change Addition . ZULCOSKY, ROBERT NAME NAME 1031 W. MORSE BLVD, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL Addition TITLE TITI F □ Delete Barnes, Diana 1031 W. Morse Blud., # 300 NAME NAME STREET ADDRESS STREET ADDRESS Winter Park, FL 32789 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

NAME OF SIGNING OFFICER OR DIRECTOR