

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 09, 2001 8:00 am**  
**Secretary of State**

02-09-2001 90108 014 \*\*\*150.00

**DOCUMENT # P30176**

1. Entity Name

**FINANCIAL PROTECTION MARKETING, INC.**

Principal Place of Business

Mailing Address

55155 N SHADELAND AVE  
INDIANAPOLIS IN 46226  
US

P.O. BOX 501670  
INDIANAPOLIS IN 46250-3670  
US

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 **35-1349213**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

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)

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 NAME STREET ADDRESS CITY - ST - ZIP	P HUGHES, JAMES E. 5155 N. SHADELAND AVE. INDIANAPOLIS IN	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD DEFOOR, JERRY W. 2801 HWY 280 S BIRMINGHAM AL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SCHULTZ, STEVEN A. 2801 HWY 280 S BIRMINGHAM AL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD HAMER, J WILLIAM 2801 HWY 280 S. BIRMINGHAM AL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPDT PRESLEY, MICHAEL 2801 HWY 280 S. BIRMINGHAM AL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S LONG, DEBORAH J 2801 HWY 280 S BIRMINGHAM AL	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President + Director Steven A. Schultz 2801 Hwy 280, S. Birmingham, AL 35223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Jerry W. DeFoor 2801 Hwy 280, S. Birmingham, AL 35223	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice-President of Operations Brent E. Griggs + Director 2801 Hwy 280, S. Birmingham, AL 35223	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Lisa Hastings 2700 Wychiff Road, Suite 101 Raleigh, NC. 27607	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP + Director T. Michael Presley 2801 Hwy 280, S. Birmingham, AL 35223	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP, Secretary, Treasurer + Director William L. McMullen, Jr. 2801 Hwy 280, S. Birmingham, AL 35223	<input checked="" type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 9.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jerry W. DeFoor, Vice President*

Date

02/02/01

Daytime Phone #

(205) 879-9230

CR2E034 (10/00)