

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

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90359 006 \*\*\*150.00

**DOCUMENT #** P93000050207

**1. Entity Name**

Manumit of Florida, Inc.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

15880 N. Greenway-Hayden Loop 15880 N. Greenway-Hayden Loop

Suite, Apt. #, etc.

Suite #100

**3. Mailing Address**

Suite, Apt. #, etc.

Suite #100

**City & State**

Scottsdale, AZ

**City & State**

Scottsdale, AZ

**4. FEI Number**

58-2062448

**Applied For**

**Not Applicable**

**Zip**

85260

**Country**

USA

**Zip**

85260

**Country**

USA

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

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

**Name**

C T Corporation System

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

1200 S. Pine Island Road

**City**

Plantation

**FL**

**Zip Code**

33324

**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) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

See Attached List of Officers  
and Directors.

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

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**DO NOT WRITE  
IN THIS SPACE**

**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jo Lynn White, Secretary

4/22/02

Date

(480) 627-2700

Daytime Phone #

CR2E034B (12/01)

Attachment to State of Florida Uniform Business Report  
Manumit of Florida, Inc.  
Document # P93000050207

658596

**11. Additional Officers and Directors of the Corporation:**

Name: Bruce Emley  
Title: President  
Business Addr: 323 Marble Mill Road  
Marietta, Georgia 30060

Name: Donald W. Slager  
Title: Executive Vice President & Director  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: Dale L. Parker  
Title: Vice President  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: Jo Lynn White  
Title: Secretary  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: Thomas P. Martin  
Title: Treasurer & Director  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: Jenny Lynn Apker  
Title: Assistant Secretary  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: James E. Gray  
Title: Director  
Business Addr: 15880 North Greenway-Hayden Loop, Suite 100  
Scottsdale, Arizona 85260

Name: Bruce Roy  
Title: Assistant Secretary  
Business Addr: 3358 Highway 51  
Fort Mill, South Carolina 29715