

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000044950

1. Entity Name

STAR MORTGAGE, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90912 020 ***158.75

Principal Place of Business

Mailing Address

700 N. WICKHAM ROAD
SUITE 109
MELBOURNE FL 32935

340 MANLEY ST
ADMINISTRATIVE OFFICES
WEST BRIDGWATER MA 02379-1021
US

2. Principal Place of Business

700 N. Wickham Road

Suite, Apt. #, etc.

Suite 109

City & State

Melbourne, FL

Zip

32935

Country

3. Mailing Address Admin Offices

Same as above

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3323149

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

AUSTIN, JAY P
C/O STAR MORTGAGE INC
700 N. WICKHAM RD. STE 109
MELBOURNE FL 32935

Name

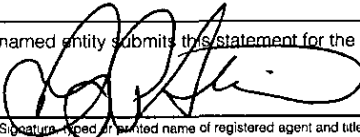
Street Address (P.O. Box Number is Not Acceptable)

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  JAY P. Austin, President April 14, 2000

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)

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FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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 P
NAME AUSTIN, JAY P
STREET ADDRESS 700 N WICKHAM RD SUITE 109
CITY-ST-ZIP MELBOURNE FL 32935

☐ Delete

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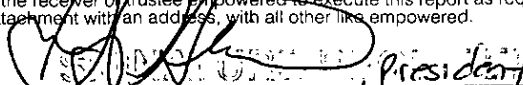
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

 JAY P. Austin, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 14, 2000 (508) 941-5616

Date

Daytime Phone #

CR2E034 (9/99)