## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P94000059207

Entity Name: 2ND CHANCE MTG. COMP., INC.

102 LEXINGTON STREET

OLDSMAR, FL 34677

Address:

City-St-Zip:

FILED Apr 26, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 102 LEXINGTON ST OLDSMAR, FL 34677 US **Current Mailing Address: New Mailing Address:** 102 LEXINGTON ST OLDSMAR, FL 34677 FEI Number: 59-3264203 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VALE, CAMERON W 102 LÉXINGTON ST OLDSMAR, FL 34677 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition VALE, CAMERON W Name: Name: 102 LEXINGTON ST Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: ( ) Delete Title: VΡ Title: () Change () Addition Name: VALE, SUZANNE Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAMERON W. VALE PRES 04/26/2002