

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2003 8:00 am
Secretary of State

02-04-2003 90099 047 ***150.00

DOCUMENT # P95000023206

1. Entity Name
ATLANTIC MORTGAGE FUNDING, INC.



Principal Place of Business
308 TEQUESTA DR
STE 25
TEQUESTA FL 33469

Mailing Address
308 TEQUESTA DR
STE 25
TEQUESTA FL 33469



2. Principal Place of Business

1530 Cypress DR #B

Suite, Apt. #, etc.

3. Mailing Address

1530 Cypress Drive

Suite, Apt. #, etc.

City & State
Jupiter, FL

Zip
33469

Country
Palm Beach

City & State
Jupiter, FL

Zip
33469

Country
Palm Beach

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0565802

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAIGH, DOREEN L
250 TEQUESTA DRIVE, SUITE 200
TEQUESTA FL 33469

7. Name and Address of New Registered Agent

Name Robin J. Burk

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

1530 Cypress Dr. Suite B

City Jupiter, FL

FL

Zip Code 33469

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Robin J. Burk
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/13/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	JEFFER, HERMAN	
STREET ADDRESS	250 TEQUESTA DR, STE 200	
CITY-ST-ZIP	TEQUESTA FL 33469	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BURK, ROBIN	
STREET ADDRESS	308 TEQUESTA DR., #25	
CITY-ST-ZIP	TEQUESTA FL 33469	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	WAYNE, ALAN	
STREET ADDRESS	308 TEQUESTA DRIVE, #25	
CITY-ST-ZIP	TEQUESTA FL 33469	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEFFER, HERMAN	only address
STREET ADDRESS	1530 Cypress DR. #B	
CITY-ST-ZIP	TEQUESTA, FL 33469 JUPITER, FL 33469	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURK, ROBIN	only address
STREET ADDRESS	1530 Cypress Dr. #B	
CITY-ST-ZIP	JUPITER, FL 33469	
TITLE	ST	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BURK, James	only address
STREET ADDRESS	1530 Cypress Dr. #B	
CITY-ST-ZIP	JUPITER, FL 33469	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robin J. Burk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/03 561-746-2555

Date

Daytime Phone #

CR2E034 (10/02)