## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**)

## DOCUMENT #

P95000076570

1. Entity Name

Zip

SIGNATURE

10.

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY - ST-ZIP

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NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-709

LENDERS CHOICE, INC.



Country

11.

TITLE

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NAME STREET ADDRESS

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Name --

City

Principal Place of Business

5760 MARKHAM WOODS ROAD LAKE MARY FL 32746

BRELSFORD, GENE MR

LAKE MARY FL 32746

5760 MARKHAM WOODS ROAD

the obligations of registered agent.

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

5760 MARKHAM WOODS RD

5760 MARKHAM WOODS RD.

**GENE BRELSFORD** 

SUSAN BRELSFORD

LAKE MARY FL

LAKE MARY FL

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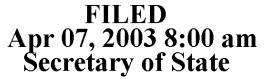
Mailing Address

5760 MARKHAM WOODS ROAD

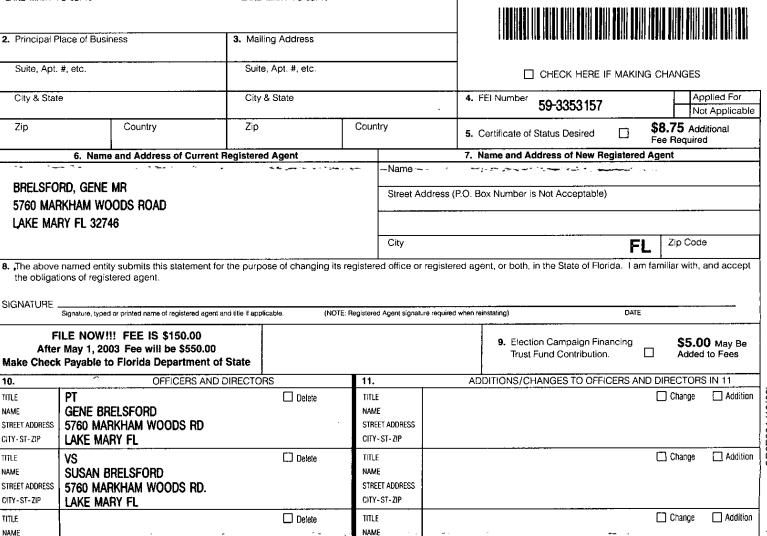
LAKE MARY FL 32746

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc City & State City & State

Zip



04-07-2003 90117 041 \*\*\*150.00



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

CITY-ST-ZIP

Change

Change

Change

☐ Addition

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