## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P96000027530 DOCUMENT # 1. Entity Name FLORIDA MORTGAGE SERVICES, INC.

**FILED** Jul 14, 2003 8:00 am Secretary of State

07-14-2003 90325 029 \*\*\*558.75



						i	_ 1				
Principal Place of Business 28000 SPANISH WELLS BLVD. SUITE 104 BONITA SPRINGS FL 34135			Mailing Address 28000 SPANISH WELLS BLVD. SUITE 104 BONITA SPRINGS FL 34135					***************************************			
2. Principal Place of Business			3. Mailing Address			<b></b>				i <b>a</b> 111111 <b>411</b> 11 1 <b>111</b> 1	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State			<del></del>	<b>4.</b> F	4. FEI Number 65-0658572 Applied For Not Applicable			
Zip	ip Country			Zip Count		try	<b>5.</b> C	Certificate of Status Desired		8.75 Ac ee Requir	
	_ 6, Name a	Registered	Registered Agent			7. Name and Address of New Registered Agent					
						Name					
KLUGER	NORMAN R		·								
KLUGER, NORMAN B 28000 SPANISH WELLS BLVD.				Street Addre			s (P.O. Box Number is Not Acceptable)				
28000 SP	'ANISH WELL					-,	<del>,</del>				
SUITE 104	4										
	SPRINGS FL				City			FL Zip Code			
	named entity stions of register		or the purpo	se of changing its	registere	ed office or regis	tered age	ent, or both, in the State of Florid	a. I am fai	miliar with	, and accept
SIGNATURE .	Signature, typed or	printed name of registered agent	and title if applic	able. (NOTE	: Registered	d Agent signature requ	ired when rei	instating)	DATE		<del></del>
					_ <del>_</del>	····		<del></del>			
FILE NOW!!! FEE IS \$550.00  After September 10, 2003 Fee will be \$750.00  Make Check Payable to Florida Department of St								Election Campaign Finan     Trust Fund Contribution.	cing 🗀		00 May Be
10.	· ·	OFFICERS AND	DIRECTOR	<u> </u>	11.	<del></del>		L DITIONS/CHANGES TO OFFICE	ERS AND I	URECTOR	2S IN 11
	PST	01110211071110	DINEO TO		-		7,00	5/110140/0/10 WAZO 10 0/11/0/		☐ Change	☐ Addition
TITLE	KLUGER, N	ODIANI B		☐ Delete	TITLE				ı	Griange	☐ Addition
NAME	COCCO CDA	NISH WELLS BLVD.			NAME						
STREET ADDRESS		RINGS FL 34135				ET ADDRESS					
CITY-ST-ZIP	DUNITA SP	MINGS FL 34133			CITY	- ST - ZIP					
THTLE				☐ Delete		_					
NAME				∟ Deiete	TITLE					Change	Addition
STREET ADDRESS				□ Delete	TITLE NAMÉ					Change	Addition (
		•		L Delete	NAM				[	Change	Addition
CITY-ST-ZIP				□ Delete	NAMI STRE	E			I	Change	Addition (
		·	····		NAMI STRE CITY-	EET ADDRESS -ST-ZIP					
TITLE	and the second second			Delete	NAMI STRE CITY-	E ET ADDRESS -ST-ZIP				Change	Addition
TITLE		a aaa aa			NAMI STRE CITY- TITLE NAMI	E ET ADDRESS -ST-ZIP E					
TITLE		e anne de la company			NAMI STRE CITY TITLE NAMI STREI	E ET ADDRESS -ST-ZIP E E ET ADDRESS					
NAME STREET ADDRESS CITY-ST-ZIP				Delete	NAME STRE CITY- TITLE NAME STREI CITY-	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP				Change	Addition
TITLE		e anne de propie			NAMI STRE CITY- TITLE NAME STREI CITY-	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE NAMM	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E E E				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE NAME STREI STREI STREI	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE NAME STREI NAME STREI	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E E E				Change	Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	-	Delete	NAME STRE CITY- TITLE NAME STREE CITY- TITLE NAME STREE CITY- TITLE TITLE TITLE TITLE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ST-ZIP				Change	Addition
TITLE		A company of the second		Delete	NAMM STRE CITY- TITLE NAMM STREICTY- TITLE CITY- TITLE CITY- TITLE NAME STREICTY- TITLE NAME	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		A control of the cont		Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE CITY- TITLE NAME STREI CITY- TITLE NAME STREI NAME STREI	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ET ADDRESS				Change	Addition  Addition
TITLE				Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE CITY- TITLE NAME STREI CITY- TITLE NAME STREI NAME STREI	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				Delete	NAMM STRE CITY- TITLE NAMM STREI CITY- TITLE CITY- TITLE NAME STREI CITY- TITLE NAME STREI NAME STREI	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP				Delete	NAMM STRE CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME CITY- CITY- CITY- CITY-	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE				Delete	NAMM STRE CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY-	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition  Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				Delete	NAMM STRE CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY- TITLE NAME STREI CITY-	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS				Change	Addition  Addition  Addition

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:**