

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000055403

1. Entity Name

APPROVAL FIRST MORTGAGE CORPORATION

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90056 026 ***150.00

Principal Place of Business

Mailing Address

3510 S FL AVE
102
LAKELAND FL 33803-4874
US

3510 S FL AVE
102
LAKELAND FL 33803-4874
US

2. Principal Place of Business

3510 S. FL Ave.

3. Mailing Address

3510 S. FL Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

102

102

City & State

Lakeland, FL

City & State

Lakeland, FL 33803

Zip

Country

33803

US

Zip

Country

33803

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLARK, RONALD L
4740 CLEVELAND HEIGHTS BOULEVARD
LAKELAND FL 33813

Name

Larry Lynn

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

3510 S. FL Ave.

City

Lakeland

FL

Zip

33803

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

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)

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 PT ☒ Delete
NAME CAFFEY, TAYLOR JR
STREET ADDRESS 3510 S. FLORIDA AVE #102
CITY-ST-ZIP LAKELAND FL 33803

TITLE VD ☐ Delete
NAME LYNN, LARRY JR
STREET ADDRESS 3510 S. FLORIDA AVENUE STE 102
CITY-ST-ZIP LAKELAND FL 33803

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Addition
NAME Constance A. Lynn
STREET ADDRESS 3510 S. FL Ave. Ste 102
CITY-ST-ZIP Lakeland, FL 33803

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 officers empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)