

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000056904**

1. Entity Name

**ABBEY MORTGAGE, INC.**

*R*

**FILED**

**Aug 24, 2000 8:00 am**  
**Secretary of State**

08-24-2000 90001 013 \*\*\*150.00

Principal Place of Business

Mailing Address

**6185 DELTONA BLVD.  
SPRING HILL FL 34608**

**6185 DELTONA BLVD.  
SPRING HILL FL 34606-1099**

2. Principal Place of Business

**6205 Deltona Blvd**

3. Mailing Address

**6205 Deltona Blvd**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Spring Hill, FL**

City & State

**Spring Hill, FL**

Zip

**34606**

Country

**USA**

Zip

**34606**

Country

**USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-3460166**

Applied Fee

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**WILCOX, GEOFF C  
5025 GINNIE COURT  
SPRING HILL FL 34608**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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 reconstituting)

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

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>WILCOX, G C</b>	
STREET ADDRESS	<b>5025 GINNIE CT</b>	
CITY-ST-ZIP	<b>SPRING HILL FL 34608</b>	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If 11)

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	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

*PAID* *✓* *1893* *\$150.00*

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/20/00*

*(352) 596-0766*

Attachment  
08/19/00  
DW80564

**Abbey Mortgage, Inc.**  
**4084 Deltona Blvd. Spring Hill, FL 34606**  
**Tel: (352)684-5220 FAX: (352)684-5223**  
*Your local mortgage source...*

August 16., 2000

Florida Department of State  
Division of Corporations  
P.O. Box Box 6327  
Tallahassee, FL 32314

Dear Sirs,

I have just received the second notice of the 2000 Uniform Business Report. The original report was mailed to you, together with a check for \$150.00, on April 20, 2000. However, upon checking with my bank statement the check has never been cashed and I understand that you have no record of receiving the filed report.


In view of the above, I enclose a copy of the report that I sent to you together with a replacement check for \$150.00 and request that the late fees be waived.

Please note that, since the date of filing, my company address and telephone numbers have changed to those shown above.

Should you have any questions, please call me.

Thank you for your attention to this matter.

Sincerely,  
Abbey Mortgage, Inc.

  
Geoff C. Wilcox  
President