

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000067854

FILED  
Mar 18, 2002 8:00 AM  
Secretary of State

**Entity Name:** CENTURY RESIDENTIAL LENDING, INC.

**Current Principal Place of Business:**

3015 W. WATERS A. #306  
TAMPA, FL 33614

**New Principal Place of Business:**

8702 NORTH BLVD  
TAMPA, FL 33604

**Current Mailing Address:**

12408 WEXFORD HILLS RD  
RIVERVIEW, FL 33659

**New Mailing Address:**

**FEI Number:** 59-3461565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYONS, JAMES D  
12408 WEXFORD HILLS ROAD  
RIVERVIEW, FL 33569 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: LYONS, JAMES D  
Address: 12408 WEXFORDHILLS RD  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES D. LYONS

PSD

03/18/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date