

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 am
Secretary of State

01-17-2002 90028 050 ***150.00

DOCUMENT # P98000005619

1. Entity Name
M & M MORTGAGES, INC.

Principal Place of Business

**1112 TROTWOOD BLVD.
WINTER SPRINGS FL 32708
US**

Mailing Address

**1112 TROTWOOD BLVD.
WINTER SPRINGS FL 32708**

2. Principal Place of Business

**427 Lake Howell Road
Suite, Apt. #, etc.**

3. Mailing Address

**1115 Trotwood Blvd
Suite, Apt. #, etc.**

City & State

Maitland, FL

City & State

Winter Springs, FL

4. FEI Number

59-3487275

Applied For

Not Applicable

Zip

32751

Country

U.S.

Zip

32708

Country

U.S.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORTON, TIMOTHY W
1112 TROTWOOD BLVD.
WINTER SPRINGS FL 32708**

7. Name and Address of New Registered Agent

Name
Timothy W. Morton
Street Address (P.O. Box Number is Not Acceptable)
1115 Trotwood Blvd
Winter Springs, FL 32708
City
Winter Springs **FL** Zip Code
32708

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 **Timothy Morton**

01-08-02

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, 2002 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 **P** ☐ Delete
NAME **MORTON, TIMOTHY**
STREET ADDRESS **1112 TROTWOOD BLVD.**
CITY-ST-ZIP **WINTER SPRINGS FL 32708**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
NAME **Timothy Morton**
STREET ADDRESS **1115 Trotwood Blvd**
CITY-ST-ZIP **Winter Springs, FL 32708**

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

TITLE ☐ Change ☐ Addition
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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 like empowered.

SIGNATURE:

SIGNATURE REQUIREMENTS
Timothy Morton - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02 (407) 332-5300
Date Daytime Phone #

CR2E034 (9/01)