

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

998000058967

Prosper Financial Services, Inc.

05-11-2000 90322 006 ***150.00

FILED

00 JUL 10 AM 9:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

99-00AR

Principal Place of Business

mailing Address

550 NORTH REO STREET
SUITE 300
TAMPA FL 33609
US

550 NORTH REO STREET
SUITE 300
TAMPA FL 33609-1037
US

2. Principal Place of Business

3. Mailing Address

5415 Lake Howell Rd
Suite 174
Winter Park, FL
32792 USA

5415 Lake Howell Rd
Suite 174
Winter Park, FL
32792 USA

4. P.E.T. Number

593517455

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROTTER, MARY F

550 NORTH REO STREET

SUITE 300

TAMPA FL 33609

5415 Lake Howell Rd Suite 174
Winter Park FL 32792

8. The undersigned hereby certifies that the information furnished herein is true and correct to the best of their knowledge and belief, and that they are the duly authorized officers or directors of the corporation.

SIGNATURE

Mary F. Trotter

4/25/00

9. The corporation is subject to the jurisdiction of the State of Florida for the purpose of filing this report and for the purpose of paying the fee thereon.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. I declare that the corporation is a corporation organized under the laws of the State of Florida.

\$5.00 May Be
Added to Fees

11. LIST OF OFFICERS AND DIRECTORS (SEE INSTRUCTIONS)

12. ADDITIONAL CHARGES (SEE INSTRUCTIONS)

NAME	TROTTER, MARY F
STREET ADDRESS	5502 NORTH REO STREET
CITY, ST, ZIP	TAMPA FL 33609
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
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NAME	5415 Lake Howell Rd Suite 174
STREET ADDRESS	Winter Park, FL 32792
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
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)(b), Florida Statutes. I further certify that the information contained on this report is true and correct to the best of my knowledge and belief, 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 manager or person in possession of the corporation, and that my name appears in Block 11 or Block 12 of this report, and that my name appears in Block 11 or Block 12 of this report, and that my name appears in Block 11 or Block 12 of this report.

SIGNATURE:

SIGNATURE A1

PRINTED NAME: MARY F. TROTTER

Mary F. Trotter 4/25/00 (407) 774-1233

KE

5/22