

2002 UNIFORM BUSINESS REPORT (UBR)

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

04-17-2002 90174 013 ***150.00

DOCUMENT # P98000066848

1. Entity Name
MORTGAGE PREPARATORY SERVICE, INC.

Principal Place of Business

**2939 CENTRAL AVE
ST PETERSBURG FL 33711**

Mailing Address

**2939 CENTRAL AVE
ST PETERSBURG FL 33711**

2. Principal Place of Business

3060-14th Avenue South

Suite, Apt. #, etc.

3. Mailing Address

3060-14th Avenue South

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3521439

Applied For

Not Applicable

Zip

33712

Country

Pinellas

Zip

33712

Country

Pinellas

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WALTERS, ELLEN D

2939 CENTRAL AVE

ST PETERSBURG FL 33711

7. Name and Address of New Registered Agent

Name

3060-14th Avenue South

St. Petersburg

City

FL

Zip Code

33712

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, 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 **PD** ☐ Delete
NAME **DAVIS, JACQUELINE**
STREET ADDRESS **3025 14TH AVE SOUTH**
CITY-ST-ZIP **ST PETERSBURG FL 33712**

TITLE **VTD** ☐ Delete
NAME **WALTERS, ELEN D**
STREET ADDRESS **1245 8TH AVE SOUTH**
CITY-ST-ZIP **ST PETERSBURG FL 33705**

TITLE **SD** ☐ Delete
NAME **DAVIS, DANIEL**
STREET ADDRESS **2538 CENTRAL AVE**
CITY-ST-ZIP **ST PETERSBURG FL 33712**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3060-14th Avenue South**
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 like empowered.

SIGNATURE:

Elen D. Walters Elen D. Walters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/02
Date

727-898-8827
Daytime Phone #

CR2E034 (9/01)