

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000091008

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

Entity Name: HERITAGE MORTGAGE CORPORATION OF S.W. FLORIDA

Current Principal Place of Business:

2886 TAMIAMI TRAIL
#10
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

3417 F TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

New Mailing Address:

2886 TAMIAMI TRAIL
#10
PORT CHARLOTTE, FL 33952

FEI Number: 65-0870565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEAVELL, ALLYSON P
3417 F TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

Name and Address of New Registered Agent:

KARNES, ALLYSON P
2886 TAMIAMI TRAIL
#10
PORT CHARLOTTE, FL 33952

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: ALLYSON P. KARNES

02/18/2002

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: PVPS () Delete
Name: LEAVELL, ALLYSON P
Address: 5721 10TH AVE NW
City-St-Zip: NAPLES, FL 34119

Title: SVP () Delete
Name: KARNES, TED J
Address: 5721 10TH AVE NW
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPS (X) Change () Addition
Name: KARNES, ALLYSON P
Address: 9646 S.W. MARINA DRIVE
City-St-Zip: ARCADIA, FL 34269

Title: SVP (X) Change () Addition
Name: KARNES, TED J
Address: 9646 S.W. MARINA DRIVE
City-St-Zip: ARCADIA, FL 34269

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: ALLYSON P. KARNES

PRES

02/18/2002

Electronic Signature of Signing Officer or Director

Date