

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000005649

FILED  
Apr 26, 2002 8:00 AM  
Secretary of State

**Entity Name:** MANHATTAN MORTGAGE OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2942 LAKE LAND HIGHLANDS ROAD  
LAKE LAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

2942 LAKE LAND HIGHLANDS ROAD  
LAKE LAND, FL 33803

**New Mailing Address:**

3056 SUTTON WOODS DRIVE  
PLANT CITY, FL 33567

**FEI Number:** 59-3566073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLOK-ANDERSEN, KIM  
3056 SUTTON WOODS DRIVE  
PLANT CITY, FL 33567

**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: PD ( ) Delete  
Name: ANDERSON, KIM  
Address: 3056 SUTTON WOODS DR.  
City-St-Zip: PLANT CITY, FL 33567

Title: VP ( ) Delete  
Name: MCDONALD, SHAWN  
Address: 2942 LAKE LAND HIGHLANDS ROAD  
City-St-Zip: LAKE LAND, FL 33803

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P/D (X) Change ( ) Addition  
Name: ANDERSON, KIM  
Address: 3056 SUTTON WOODS DR.  
City-St-Zip: PLANT CITY, FL 33567

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

Title: T/D ( ) Change (X) Addition  
Name: BLOK-ANDERSEN, JUDY  
Address: 3056 SUTTON WOODS DRIVE  
City-St-Zip: PLANT CITY, FL 33567

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:** KIM BLOK-ANDERSEN

PRES

04/26/2002

Electronic Signature of Signing Officer or Director

Date