

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000019942**

1. Entity Name
Florida Home Lending, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 11 PM 6:24

Principal Place of Business
1890 Semoran Blvd.
Suite 237
Winter Park FL 32792

Mailing Address
1110 Knoll Dr
Naperville IL 60565

2. Principal Place of Business

3. Mailing Address
1110 Knoll Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Naperville IL 60565

Zip

Country

Zip

60565

Country

4. FEI Number

36-4279120

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name Robert Cleland

Street Address (P.O. Box Number is Not Acceptable)
4653 Cason Cove Dr

City Orlando

FL

32819

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

Robert Cleland

ROBERT CLELAND

10-7-00

(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)

X

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO/President
Darrell A. Wolski
1110 Knoll Dr
Naperville IL 60565

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Jacquelyn Wolski
1110 Knoll Dr
Naperville IL 60565

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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☐ Addition

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:

Darrell Wolski

DARRELL WOLSKI

10-9-00 630-983-0654

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

CR2E034 (5/00)