

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000020479

1. Entity Name

BRENTWOOD MORTGAGE SERVICES, INC.

FILED

Jan 22, 2000 8:00 am  
Secretary of State

01-22-2000 90019 043 \*\*\*150.00

Principal Place of Business

765 BRENTWOOD POINT  
NAPLES FL 33963

Mailing Address

765 BRENTWOOD POINT  
NAPLES FL 34110-7915

2. Principal Place of Business

4081 TAMiami TRAIL N.

Suite, Apt. #, etc.

SUITE C105

City & State

NAPLES, FL

Zip  
34103

Country

USA

3. Mailing Address

P.O. Box 770535

Suite, Apt. #, etc.

City & State

NAPLES, FL

Zip

34107

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3561024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE  
SUITE 125  
CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name

KENNETH P. ENGLER

Street Address (P.O. Box Number is Not Acceptable)

2318 MILL STREAM COURT

City

NAPLES

FL

Zip Code

34109

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]*

KENNETH P. ENGLER, SECRETARY

1-7-2000

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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May B  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	LYONS, SUSAN K	
STREET ADDRESS	765 BRENTWOOD POINT	
CITY-ST-ZIP	NAPLES FL 33963	
TITLE	VD	<input type="checkbox"/> Delete
NAME	CROUCH, STEPHEN B	
STREET ADDRESS	765 BRENTWOOD POINT	
CITY-ST-ZIP	NAPLES FL 33963	
TITLE	STD	<input type="checkbox"/> Delete
NAME	ENGLER, KENNETH P	
STREET ADDRESS	765 BRENTWOOD POINT	
CITY-ST-ZIP	NAPLES FL 33963	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME	LYONS, SUSAN K.	
STREET ADDRESS	765 BRENTWOOD POINT	
CITY-ST-ZIP	NAPLES, FL 34110	
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME	CROUCH, STEPHEN B.	
STREET ADDRESS	8805 TAMiami TRAIL N., PMB 222	
CITY-ST-ZIP	NAPLES, FL 34108	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
NAME	ENGLER, KENNETH P.	
STREET ADDRESS	2318 MILL STREAM COURT	
CITY-ST-ZIP	NAPLES, FL 34109	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]* SUSAN LYONS, PRES.

1-7-2000

(941) 659 1660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #