2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 AM
Secretary of State

DOCUMENT# P99000040453

Entity Name: INNOVATIVE MORTGAGE SPECIALIST, INC.

Current Principal Place of Business:

4821 ATLANTIC BLVD., SUITE 202
JACKSONVILLE, FL 32207

New Principal Place of Business:

3805 UNIVERSITY BLVD. W
SUITE A
JACKSONVILLE, FL 32217

Current Mailing Address:

3409 SECRET COVE PL
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3588133 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GROGAN, JOHN
3409 SECRET COVE PL
JACKSONVILLE, FL 32216

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: PSD ( ) Delete
Name: GROGAN, JONATHAN P
Address: 616 ACORN CT
City-St-Zip: JACKSONVILLE, FL 32259

Title: VTD ( ) Delete
Name: GROGAN, JOHN P
Address: 3409 SECRET COVE PL
City-St-Zip: JACKSONVILLE, FL 32216

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GROGAN, JONATHAN P
Address: 616 ACORN CT
City-St-Zip: JACKSONVILLE, FL 32259

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

Title: VSD ( ) Change (X) Addition
Name: GROGAN, THERESA S
Address: 616 ACORN CT
City-St-Zip: JACKSONVILLE, FL 32259

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: THERESA S. GROGAN VSD 04/30/2002

Electronic Signature of Signing Officer or Director — Date