

2000-2002 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99 0000 49754**

1. Entity Name

ALAGUA Mortgage Co.

FILED

02 AUG 22 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

800007428018--3

-08/29/02--01050--013

****458.75 ****458.75

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2650 So. Mellowville Ave

3. Mailing Address

2650 So. Mellowville Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SANFORD, FLORIDA

City & State

SANFORD FL

4. FEI Number

59-3585940

Applied For

Not Applicable

Zip

32773

Country

USA

Zip

32773

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Luke Fichtlow

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

2650 So. Mellowville Ave

City **SANFORD**

FL

Zip Code

32773

DO NOT WRITE IN THIS SPACE

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

Luke Fichtlow

Luke Fichtlow

8/02

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)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

Luke Fichtlow President
2650 So. Mellowville Ave
SANFORD, FL 32773

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Jenny Roth V.P.
2650 So. Mellowville Ave
SANFORD, FL 32773

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

8/8/22

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Jenny Roth

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/22/02 (407) 323-1827

CR2E034B (12/01)

Alaqua Mortgage Company
300 Primera Boulevard, Suite 432
Lake Mary, FL 32746

August 5, 2002

Sean Toner
Senior Section Administrator
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Report Fees for Alaqua Mortgage Corporation for FY 200, 2001 & 2002

Dear Mr. Toner:

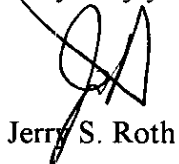
We are in receipt of your letter of July 24, 2002, Letter Number 402A00045078, wherein you inform us that you "can waive the reinstatement fee for Alaqua Mortgage Corporation and only the report fees for each year is required to make the corporation active."

The total amount required is \$450 and an additional \$8.75 for each certificate of status requested."

Enclosed please find Alaqua Mortgage Company's Check No. 0533 in the amount of \$458.85, \$450 for the 3 years and \$8.75 for the 2002 Certificate of Status.

Thank you for your attention to the above.

Very truly yours,



Jerry S. Roth

JSR:med

Enclosure