

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90001 049 ***550.00

DOCUMENT # P99000070032

1. Entity Name
FIRSTFUND MORTGAGE CORPORATION

Principal Place of Business

**4977 N UNIVERSITY DRIVE
 SUITE 27
 LAUDERHILL FL 33351**

Mailing Address

**4977 N UNIVERSITY DRIVE
 SUITE 27
 LAUDERHILL FL 33351**

*Change of
 address*

2. Principal Place of Business

4977 N. UNIVERSITY DR

3. Mailing Address

4977 N. UNIVERSITY DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
LAUDERHILL FL 33351

City & State
LAUDERHILL

4. FEI Number
65-0938844

Applied For
 Not Applicable

Zip
FL 33351

Country
USA

Zip
FL 33351

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**FERGUSON, LLOYD
 4977 N UNIVERSITY DRIVE
 SUITE 27
 LAUDERHILL FL 33351**

NEW ADDRESS

7. Name and Address of New Registered Agent

Name **FERGUSON, LLOYD**
 Street Address (P.O. Box Number is Not Acceptable)
4977 N. UNIVERSITY DR
 City **LAUDERHILL** FL Zip Code **33351**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **7/3/02**

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 \$550.00
After September 13, 2002 Fee 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 **D** ☐ Delete
 NAME **FERGUSON, LLOYD**
 STREET ADDRESS **11810 HIGHLAND PLACE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **D** ☐ Delete
 NAME **EZELL-FERGUSON, EMOGENE**
 STREET ADDRESS **11810 HIGHLAND PLACE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **D** ☒ Delete
 NAME **ENGLISH, RUPERT S**
 STREET ADDRESS **1380 NW 43 TERRACE #281**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33313**

TITLE **D** ☐ Delete
 NAME **HOLNESS, ADOLPH E**
 STREET ADDRESS **7361 NW 35TH COURT**
 CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

7/3/02 954-572-0103

CR2E034 (4/02)