

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000073603

1. Entity Name

UNITED MORTGAGE LENDERS, INC.

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90197 002 ***150.00

Principal Place of Business

301 CRAWFORD BLVD
STE 102
BOCA RATON FL 33432
US

Mailing Address

301 CRAWFORD BLVD
STE 102
BOCA RATON FL 33432
US

2. Principal Place of Business

301 Crawford Blvd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

4. FEI Number 65-0938671

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVENPORT, JILL
301 CRAWFORD BLVD
STE 102
BOCA RATON FL 33432

Name

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

301 Crawford Blvd.

Ste. 201

City

Boca Raton

FL

Zip Code 33432

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, 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. ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME THORNTON, JAMIE A
STREET ADDRESS 2511 SW 4TH ST
CITY-ST-ZIP BOYNTON BEACH FL 33435 ☐ Delete

TITLE P
NAME Jamie A. Thornton
STREET ADDRESS 710 Eldorado Ln.
CITY-ST-ZIP Delray Beach FL 33444 ☒ Change ☐ Addition

TITLE V
NAME CHAPMAN, BRENT D
STREET ADDRESS 1522 ASBURY WAY
CITY-ST-ZIP BOYNTON BEACH FL 33426 ☐ Delete

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

TITLE V
NAME BRUCE, CHRIS
STREET ADDRESS 1522 ASBURY WAY
CITY-ST-ZIP BOYNTON BEACH FL 33426 ☐ Delete

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

TITLE V
NAME THORNTON, RALPH
STREET ADDRESS 740 ST ALBANS DR
CITY-ST-ZIP BOCA RATON FL 33486 ☐ Delete

TITLE V
NAME Ralph Thornton
STREET ADDRESS 760 St. Albans Dr.
CITY-ST-ZIP Boca Raton FL 33486 ☒ Change ☐ Addition

TITLE OM
NAME DAVENPORT, JILL
STREET ADDRESS 2511 SW 4TH ST
CITY-ST-ZIP BOYNTON BEACH FL 33435 ☐ Delete

TITLE OM
NAME Jill Davenport
STREET ADDRESS 710 Eldorado Ln.
CITY-ST-ZIP Delray Beach FL 33444 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME Office Manager
STREET ADDRESS Todd Gilmore
CITY-ST-ZIP 1205 Crystal Way Apt. C
Delray Beach FL 33444 ☐ Change ☒ 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:

Jill E. Davenport

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/01

Date

561-416-5251

Daytime Phone #

CR2E034 (10/00)