## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## DOCUMENT # P99000083065

1. Entity Name

MORTGAGE PROCESSING AUTHORITY INC



## **FILED** Jan 16, 2003 8:00 am Secretary of State 01-16-2003 90042 037 \*\*\*150.00

| Morri Q   | NGE I NOOLOOMA AOTT  | OHET INC.   |                                       |  |                                |
|---|--|---|---------------------------------------|--|--------------------------------|
| Principal Pla<br>9920 NW 11<br>PLANTATION                     |  | Mailing Address<br>9920 NW 11TH STREET<br>PLANTATION FL 33322 |                                       |  |                                |
|   |  |   |                                       |  |                                |
| 2. Principal  | Place of Business  | 3. Mailing Address  |                                       |  | 8 8 1111                       |
| Suite, Apt  | t. #, etc.   | Suite, Apt, #:etc:  |                                       | CHÊCK HÊRE IF MAKING O   | CHANGES : *-                   |
| City & Sta  | ate  | City & State  |                                       | 4 FELNumber  | Applied For                    |
| Žip   | Country  | Zip   | Country                               | 65-0949532   | Not Applicable                 |
|   |  | ,   | Souriary                              |  | 8.75 Additional<br>se Required |
|   | 6. Name and Address of Curr  | ent Registered Agent  | Name                                  | 7. Name and Address of New Registered Ag                                       | ent                            |
| STOTT, ROBERT S<br>9920 NW 11TH STREET<br>PLANTATION FL 33322 |  |   |                                       | (P.O. Box Number is Not Acceptable)  |                                |
|   |  |   | City                                  | FL   | Zip Code                       |
| the obligation  | ations of registered agent.  |   | registered office or registe          | ered agent, or both, in the State of Florida. I am fan<br>ad when reinstating) | niliar with, and accept        |
| Afte<br>Make Checi  | FILE NOW!!! FEE IS \$150.00<br>or May 1, 2003 Fee will be \$550.0<br>k Payable to Florida Department | t of State  |                                       | 9. Election Campaign Financing Trust Fund Contribution.                        | \$5.00 May Be<br>Added to Fees |
| TITLE   | PVST OFFICERS AN   | ND DIRECTORS  | 11.                                   | ADDITIONS/CHANGES TO OFFICERS AND DI   |                                |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                         | STOTT, ROBERT S<br>9920 NW 11TH STREET<br>PLANTATION FL 33322  | □ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | Change Addition                |
| TITLE<br>Name<br>Street address<br>City-St-Zip                | D<br>STOTT, ROBERT S<br>9920 NW 11TH STREET<br>PLANTATION FL 33322                                   | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | Change Addition                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                |  | Delete -  | NAME STREET ADDRESS CITY-ST-ZIP       |  | Change Addition                |
| TITLE<br>NAME<br>STREET ADDRESS<br>STY-ST-ZIP                 |  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | Change Addition                |
| ITLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP                   |  | ☐ Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP |  | Change Addition                |
| ITLE<br>IAME<br>TREET ADDRESS                                 |  | ☐ Delete  | TITLE NAME STREET ADDRESS             |  | Change                         |

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Signature