

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085984

1. Entity Name

BANCOSOURCE MORTGAGE CORP.

FILED

May 04, 2001 8:00 am  
Secretary of State

05-04-2001 90124 024 \*\*\*150.00

Principal Place of Business

407 LAKE HOWELL RD  
MAITLAND FL 32751

Mailing Address

407 LAKE HOWELL RD  
MAITLAND FL 32751

2. Principal Place of Business

430 MAIN ST.

3. Mailing Address

430 MAIN ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WINDERMERE, FL.

City & State

WINDERMERE, FL.

Zip

34786

Country

US

Zip

34786

Country

US

4. FEI Number

65-0606091

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PAPAGNO, GREG D  
407 LAKE HOWELL RD  
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name

GREG PAPAGNO

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

430 MAIN ST.

City

WINDERMERE, FL.

FL

Zip Code

34786

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]* Greg Papagno (Pres.)

4/30/01

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) ☐

**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

TITLE P ☐ Delete  
NAME PAPAGNO, GREG  
STREET ADDRESS 407 LAKE HOWELL RD 430 MAIN ST.  
CITY-ST-ZIP MAITLAND FL 32751 WINDERMERE, FL. 34786

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Pres. ☒ Change ☐ Addition  
NAME 619 PAPAGNO  
STREET ADDRESS 430 MAIN ST.  
CITY-ST-ZIP WINDERMERE, FL. 34786

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

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

TITLE ☐ Change ☐ Addition  
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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]* Greg Papagno

4/30/01

407 876-8218

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)