

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091672

1. Entity Name

PROFESSIONAL MORTGAGE AND LOAN, INC.

Principal Place of Business

1474 CHESTERFIELD DRIVE
DUNEDIN FL 34698

Mailing Address

1474 CHESTERFIELD DRIVE
DUNEDIN FL 34698-4108

2. Principal Place of Business

1474 Chesterfield Drive

Suite, Apt. #, etc.

3. Mailing Address

1474 Chesterfield Drive

Suite, Apt. #, etc.

City & State

Dunedin, FL

City & State

Dunedin, FL

Zip

34698

Country

PineUas

Zip

34698

Country

PineUas

4. FEI Number

59-3605567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SINGER, SCOTT J
1474 CHESTERFIELD DRIVE
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SINGER, SCOTT J
1474 CHESTERFIELD DRIVE
DUNEDIN FL 34698

☐ Delete

TITLE
NAME
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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☐ 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:

Scott J Singer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90008 030 ***150.00

C0003521



DO NOT WRITE IN THIS SPACE

1/6/00

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