

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 JUN 21 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **555203**

1. Entity Name

Taylor, Bean & Whitaker Mortgage Corp.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

101 NE 2nd Street

Suite, Apt. #, etc.

Ocala, Florida 34470

City & State

34470

Zip

Country
USA

3. Mailing Address

101 NE 2nd Street

Suite, Apt. #, etc.

Ocala, Florida 34470

City & State

34470

Zip

Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Bruce Brashear, Esq.

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

926 NW 13th Street

City

Gainesville

FL

Zip Code
32601

**DO NOT WRITE
IN THIS SPACE**

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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**President
Raymond Edward Bowman
101 NE 2nd Street
Ocala, Florida 34470**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

700005972717--5

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice President
Andrew Michael Murray
101 NE 2nd Street
Ocala, Florida 34470**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

-06/25/02--01040--028

*******70.00 *****70.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice Chairman, Director
Sherry Dianne Dickinson
101 NE 2nd Street
Ocala, Florida 34470**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO/Director
Lee Bentley Farkas
101 NE 2nd Street
Ocala, Florida 34470**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Director
Coda Clyde Roberson, III
101 NE 2nd Street
Ocala, Florida 34470**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Raymond E. Bowman, President 6/6/2002 (800) 728-1129

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)