

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90030 045 ***150.00

DOCUMENT # S97642

1. Entity Name

NAL MORTGAGE CORPORATION

Principal Place of Business	Mailing Address
11825 N. PENNSYLVANIA ST., DEPT B2B	11825 N. PENNSYLVANIA ST., DEPT B2B
CARMEL, IN 46032	CARMEL, IN 46032

427606

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0297605		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ \$8.75 Additional Fee Required	
City & State		City & State				☐ Not Applicable	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM				Name			
1200 S PINE ISLAND RD.				Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				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 _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME	PCOBDT JAMES J LARKIN	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS	11825 N. PENNSYLVANIA ST., CARMEL, IN 46032		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME	SVP WILLIAM T. DEVANNEY, JR.	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS	11825 N. PENNSYLVANIA ST., CARMEL, IN 46032		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME	S RICHARD R. DYKHOUSE	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS	11825 N. PENNSYLVANIA ST., CARMEL, IN 46032		STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: Richard R. Dykhouse RICHARD R. DYKHOUSE, SECRETARY 2/27/02 317-817-6000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)