2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State
05-11-2000 90305 050 ***150.00

DOCUMENT # V59930

1. Entity Name

STATEWIDE MORTGAGE, INC.

Principal Place of Business	Mailing Address
2471 MCMULLEN BOOTH RD. STE 5 CLEARWATER FL 34619	2471 MCMULLEN BOOTH RD. STE 5 CLEARWATER FL 33759-1010

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2560 Enterprise Rd. E.	2560 Enterprise Rd. E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Clearwater FL	Clearwater FL
Zip: 33759 Country: US	Zip: 33759 Country: US

4. FEI Number 59-3141498 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KENNEDY, BRIAN
2471 MCMULLEN BOOTH RD.
STE 5
CLEARWATER FL 34619

7. Name and Address of New Registered Agent

Name: Kennedy, Brian (ADDRESS CHANGE ONLY)
Street Address (P.O. Box Number is Not Acceptable): 2560 Enterprise Rd. E.
City: Clearwater **FL** Zip Code: 33759

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: Brian Kennedy
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.* ☐ **$5.00** May Be *Added to Fees*

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MARVIN, TIMOTHY E. 960 LIVE OAK AVE. ST PETERSBURG FL 33704	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KENNEDY, BRIAN J. 11575 47TH AVE N ST PETERSBURG FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KENNEDY, BRIAN J. 11575 47TH AVE N ST PETERSBURG FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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: SIGNATURE REQUIRED Brian J. Kennedy, V.P. 4/26/00 (727) 797-0300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #