

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000000731

**Entity Name:** INLANTA MORTGAGE, INC.

**Current Principal Place of Business:**

W239 N3490 PEWAUKEE ROAD  
SUITE 200 SUITE 200  
PEWAUKEE, WI 53072

**Current Mailing Address:**

W239 N3490 PEWAUKEE ROAD  
SUITE 200  
PEWAUKEE, WI 53072 US

**FEI Number:** 39-1767726

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:** MARK WILLIAMS

03/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name KNOWLTON, JOHN  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

Title PRESIDENT  
Name BUEGE, PAUL  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

Title VICE-PRESIDENT  
Name BUEGE, PAUL  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

Title VICE-PRESIDENT  
Name KNOWLTON, CHRISTOPHER  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

Title SECRETARY  
Name WATRY, JOHN L.  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

Title TREASURER  
Name WATRY, JOHN L.  
Address W239 N3490 PEWAUKEE ROAD SUITE 200  
City-State-Zip: PEWAUKEE WI 53072

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL BUEGE

PRESIDENT

03/30/2019

Electronic Signature of Signing Officer/Director Detail

Date