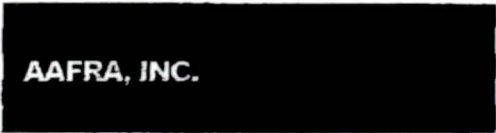


2281 Lee Road Suite 204
Winter Park, FL 32789
Phone 407-740-8881
Fax 407-740-8882



Fax

To: Dr. Fletcher **From:** Lamont Jackson

Fax: 202-488-9123 **Pages:** 5

Phone: 202-554-0573 **Date:** 3/4/03

Re: Application **CC:**

Urgent For Review Please Comment Please Reply Please Recycle

Dr. Fletcher,

Please fill out the Attach. Application.

Initial at Bottom of Each page and

Sign Pages 3 & 4.

Lamont Jackson

Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when the income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or the income or assets of the Borrower's spouse will not be used as a basis for loan qualification, but his or her liabilities must be considered because the Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan

I. TYPE OF MORTGAGE AND TERMS OF LOAN

Mortgage Applied for:	<input type="checkbox"/> V.A.	<input checked="" type="checkbox"/> Conventional	<input type="checkbox"/> Other:	Agency Case Number	Lender Case Number
Amount \$	Interest Rate %	No. of Months	Amortization Type:	<input checked="" type="checkbox"/> Fixed Rate	<input type="checkbox"/> Other (explain):
				<input type="checkbox"/> GPM	<input type="checkbox"/> ARM (type):

II. PROPERTY INFORMATION AND PURPOSE OF LOAN

Subject Property Address (street, city, state, ZIP)	No. of Units
516 G. Street SW, Washington, DC 20024 County: District Of Columbia	1
Legal Description of Subject Property (attach description if necessary)	Year Built

Purpose of Loan	<input type="checkbox"/> Purchase	<input type="checkbox"/> Construction	<input type="checkbox"/> Other (explain):	Property will be:
	<input checked="" type="checkbox"/> Refinance	<input type="checkbox"/> Construction-Permanent		<input checked="" type="checkbox"/> Primary Residence
				<input type="checkbox"/> Secondary Residence
				<input type="checkbox"/> Investment

Complete this line if construction or construction-permanent loan.

Year Lot Acquired	Original Cost	Amount Existing Liens	(a) Present Value of Lot	(b) Cost of Improvements	Total (a+b)
\$	\$	\$	\$	\$	\$

Complete this line if this is a refinance loan.

Year Acquired	Original Cost	Amount Existing Liens	Purpose of Refinance	Describe Improvements	<input type="checkbox"/> made <input type="checkbox"/> to be made
\$	\$	12,000	Cash-Out/Other	Cost \$	

Title will be held in what Name(s)	Manner in which Title will be held	Estate will be held in
		<input checked="" type="checkbox"/> Fee Simple
		<input type="checkbox"/> Leasehold (show expiration date)

Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain)

Borrower

III. BORROWER INFORMATION

Co-Borrower

Borrower's Name (include Jr. or Sr. if applicable)				Co-Borrower's Name (include Jr. or Sr. if applicable)			
Arthur Fletcher							
Social Security Number	Home Phone (incl. area code)	Age	Yrs. School	Social Security Number	Home Phone (incl. area code)	Age	Yrs. School
XXXXXXXX	202-554-0573						
<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried (include single, divorced, widowed)	Dependents (not listed by Co-Borrower) no. ages		<input type="checkbox"/> Married	<input type="checkbox"/> Unmarried (include single, divorced, widowed)	Dependents (not listed by Borrower) no. ages	
<input type="checkbox"/> Separated				<input type="checkbox"/> Separated			
Present Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.		Present Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.	

If residing at present address for less than two years, complete the following:

Former Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.	Former Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.
Former Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.	Former Address (street, city, state, ZIP)	<input type="checkbox"/> Own <input type="checkbox"/> Rent	No. Yrs.

Borrower

IV. EMPLOYMENT INFORMATION

Co-Borrower

Name and Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job	Name and Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job
		Yrs. employed in this line of work/profession			Yrs. employed in this line of work/profession
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

Name and Address of Employer	<input type="checkbox"/> Self Employed	Dates(from-to)	Name and Address of Employer	<input type="checkbox"/> Self Employed	Dates(from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name and Address of Employer	<input type="checkbox"/> Self Employed	Dates(from-to)	Name and Address of Employer	<input type="checkbox"/> Self Employed	Dates(from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	

Attention: Dr. Arthur Fletcher

Date: 3/12/2003

Company:

Number of Pages: 1

Fax Number: 1-202-488-9123

Voice Number:

From: Lamont Jackson

Company: JMS Investment Partners

Fax Number: 407-382-0551

Voice Number: 407-421-5763

Subject: Loan Application

Comments:

Dr. Fletcher,
Please fill the attached application and fax it to my home fax#
407-382-0551.

Thanks,
Lamont Jackson
AAFRA