

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000092379

**FILED**  
**Jun 28, 2010**  
**Secretary of State**

**Entity Name:** CAPE CORAL MORTGAGE, INC.

**Current Principal Place of Business:**

2816 DEL PRADO BLVD S.  
SUITE #1  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

3501 DEL PRADO BLVD S.  
SUITE #200  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

2816 DEL PRADO BLVD S.  
SUITE #1  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

3501 DEL PRADO BLVD S.  
SUITE #200  
CAPE CORAL, FL 33904 US

**FEI Number:** 62-1798548

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRERICHS, KIM  
2816 DEL PRADO BLVD S  
SUITE #1  
CAPE CORAL, FL 33904 US

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

FRERICHS, KIM  
3501 DEL PRADO BLVD S  
SUITE #200  
CAPE CORAL, FL 33904 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: KIM FRERICHS

06/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FRERICHS, STACEY E  
Address: 3509 SE 22ND PLACE  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: V  
Name: FRERICHS, KIM A  
Address: 3509 SE 22ND PLACE  
City-St-Zip: CAPE CORAL, FL 33904 US

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: STACEY FRERICHS

PRES

06/28/2010

Electronic Signature of Signing Officer or Director

Date