

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000274

Entity Name: FIDELCAP CORP.

FILED  
Jun 08, 2009  
Secretary of State

**Current Principal Place of Business:**

1385 BOSTON POST ROAD  
LARCHMONT, NY 10538

**New Principal Place of Business:**

**Current Mailing Address:**

1385 BOSTON POST ROAD  
LARCHMONT, NY 10538

**New Mailing Address:**

FEI Number: 13-3598108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCNRITTWIESER, STEVEN  
40 65B VILLAGE DRIVE  
DELRAY BEACH, FL 33445 US

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

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: AUDINO, FRANK  
Address: 473 QUAKER RIDGE ROAD  
City-St-Zip: NEW ROCHELLE, NY 10804

Title: VP ( ) Delete  
Name: LAGRECA, RICHARD J  
Address: 4 HENKER FARM ROAD  
City-St-Zip: BEDFORD, NY 10504

Title: S ( ) Delete  
Name: MALDARI, CAROL  
Address: 20 FAIRWAY DRIVE  
City-St-Zip: EASTCHESTER, NY 10709

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANK AUDINO

PRES

06/08/2009

Electronic Signature of Signing Officer or Director

Date