

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15169

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: ABC MORTGAGE OF TAMPA, INC.

## Current Principal Place of Business:

% MICHAEL E FERNANDEZ  
6112 NORTH FLORIDA AVE  
TAMPA, FL 33604

## New Principal Place of Business:

## Current Mailing Address:

% MICHAEL E FERNANDEZ  
6112 NORTH FLORIDA AVE  
TAMPA, FL 33604

## New Mailing Address:

FEI Number: 59-2949477      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FERNANDEZ, MICHAEL E PRES  
6112 NORTH FLORIDA AVENUE  
TAMPA, FL 33604      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FERNANDEZ, MICHAEL E PRES  
Address: 3431 VALLEY RANCH DRIVE  
City-St-Zip: LUTZ, FL 33549 US

Title: STD ( ) Delete  
Name: FERNANDEZ, DAVID B STD  
Address: 3832 PENINSULAR DR  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: VD ( ) Delete  
Name: BAILEY, JAMES E VD  
Address: 6112 N FLORIDA AVE  
City-St-Zip: TAMPA, FL 33604 US

## 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: MICHAEL E FERNANDEZ

PRES

03/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date