516-364-8500

**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Jan 30, 2001 8:00 am Secretary of State DOCUMENT # F9700005053 1. Entity Name FIDELITY MORTGAGE INC. 01-30-2001 90087 031 \*\*\*150.00 Principal Place of Business Mailing Address 8044 MONTGOMERY ROAD % DELTA FUNDING CORPORATION SUITE 244 1000 WOODBURY RD., ATTN: LEGAL DEPT, A0014210 CINCINNATI OH 45236 WOODBURY NY 11797 2. Principal Place of Business 3. Mailing Address 1000 Woodbury Road Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Woodbary 4. FEI Number Applied For 11-3360263 NY Not Applicable Zip 11797 Country Country \$8.75 Additional 5. Certificate of Status Desired Nassau Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition MILLER, HUGH NAME STREET ADDRESS 1000 WOODBURY ROAD STREET ADDRESS WOODBURY NY 11797 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition MILLER, MARC NAME STREET ADDRESS 1000 WOODBURY ROAD STREET ADDRESS CITY-ST-ZIP WOODBURY NY 11797 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition BLASS, RICHARD NAME NAME STREET ADDRESS 1000 WOODBURY ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WOODBURY NY 11797 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Richard Blass

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: