

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G21372

FILED  
Mar 24, 2008  
Secretary of State

Entity Name: FINANCIAL MORTGAGE CONSULTANTS, INC.

**Current Principal Place of Business:**

220 PASADENA AVENUE SOUTH  
ST. PETERSBURG, FL 33707 US

**New Principal Place of Business:**

**Current Mailing Address:**

220 PASADENA AVENUE SOUTH  
ST. PETERSBURG, FL 33707 US

**New Mailing Address:**

FEI Number: 59-2273519      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LEE, F H  
1610-A ROYAL PALM DRIVE SOUTH  
GULFPORT, FL 33707 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: VD ( ) Delete  
Name: GOFORTH, DELBERT  
Address: 6222 FAIRWAY BAY BLVD S  
City-St-Zip: GULFPORT, FL 33707

Title: ST ( ) Delete  
Name: MORTON, JUDY  
Address: 6232 FAIRFIELD AVE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: PD ( ) Delete  
Name: LEE, F H  
Address: 1610-A ROYAL PALM DRIVE SOUTH  
City-St-Zip: GULFPORT, FL 33707

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

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

Title: ST (X) Change ( ) Addition  
Name: MORTON, JUDY  
Address: 6232 FAIRFIELD AVE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33707

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: F.H. LEE

PD

03/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date