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Apr 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K15031** (3)

1. Corporation Name
FIDELITY BANK OF FLORIDA

Principal Place of Business
**1380 N COURTENAY PARKWAY
MERRITT ISLAND FL 32953**

Mailing Address
**1380 N COURTENAY PARKWAY
MERRITT ISLAND FL 32953-4417**



3. Date Incorporated or Qualified **01/22/1990** 3a. Date of Last Report **04/18/1996**

4. FEI Number **59-3001999** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**MICHAEL M. STOREY
1380 NORTH COURTENAY PARKWAY
MERRITT ISLAND, FL 32953**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	STOREY, CAROLYN Y.	
STREET ADDRESS	725 S. ATLANTIC AVENUE	
CITY - ST - ZIP	COCOA BCH. FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DAVIS, JANSON W	
STREET ADDRESS	150 FORTENBERRY ROAD - VILLA A	
CITY - ST - ZIP	MERRITT ISLAND FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STALNAKER M D, JEFFREY C	
STREET ADDRESS	699 W. COCOA BEACH CAUSEWAY, SUITE 404	
CITY - ST - ZIP	COCOA BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	STOREY, WOODROW W.	
STREET ADDRESS	201 PARK WEST, 250 CAROLINA AVENUE	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GARRISON, DONNA F.	
STREET ADDRESS	2380 COX ROAD	
CITY - ST - ZIP	COCOA FL	
TITLE	C	<input type="checkbox"/> DELETE
NAME	STOREY, MICHAEL	
STREET ADDRESS	725 S. ATLANTIC AVENUE	
CITY - ST - ZIP	COCOA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	STOREY, CAROLYN Y.
1.3 STREET ADDRESS	1465 QUINCE AVENUE
1.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32952 <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	STOREY, WOODROW W.
4.3 STREET ADDRESS	1145 IRONSIDE AVENUE
4.4 CITY - ST - ZIP	MELBOURNE, FL 32940
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	STOREY, MICHAEL M.
6.3 STREET ADDRESS	1465 QUINCE AVENUE
6.4 CITY - ST - ZIP	MERRITT ISLAND, FL 32952

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____
PRESIDENT, VICE PRESIDENT OR PERSON IN CHARGE OF SIGNATURE ON DIRECTOR

APRIL 9, 1997 407/452-0011

Date Daytime Phone #

CR2E034 (9/96)