(9/01)

CR2E034

FILED

2002 Uniform Business Report (UBR)

Apr 02, 2002 8:00 am Secretary of State DOCUMENT # K15031 1. Entity Name 04-02-2002 90105 044 ***150.00 FIDELITY BANK OF FLORIDA Principal Place of Business Mailing Address 1380 N COURTENAY PARKWAY 1380 N COURTENAY PARKWAY MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3001999 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MICHAEL M. STOREY Street Address (P.O. Box Number is Not Acceptable) 1380 NORTH COURTENAY PARWAY MERRITT ISLAND, FL 32953 Zin Code 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Addition TITLE ☐ Delete TITLE NAME NAME STOREY, CAROLYN Y. STREET ADDRESS 4370 STILLWATERS DRIVE STREET ADDRESS CITY-ST-ZIP **MERRITT ISLAND FL 32952** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME DAVIS, JANSON W STREET ADDRESS 150 FORTENBERRY ROAD - VILLA A STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MERRITT ISLAND FL TITLE ☐ Delete TITLE ☐ Change □ Addition NAME NAME STALNAKER M D. JEFFREY C STREET ADDRESS STREET ADDRESS 699 W. COCOA BEACH CAUSEWAY, SUITE 404 CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ GARRISON, DONNA F. NAME STREET ADDRESS STREET ADDRESS 2380 COX ROAD CITY-ST-ZIP CITY-ST-ZIP COCOA FL ☐ Delete Addition NAME STOREY, MICHAEL NAME STREET ADDRESS STREET ADDRESS 4370 STILLWATERS DRIVE CITY-ST-7IP CITY-ST-ZIP MERRITT ISLAND FL 32952 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.

MARCH 25, 2002

321/452-0011

Date

Daytime Phone #