FILED Jan 15, 2003 8:00 am Secretary of State 01-15-2003 90259 023 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

K15031

t. Entity Name

FIDELITY BANK OF FLORIDA

| | | | | | | O WE I | | | | | | | | |
|--|---|---|------------------|--|------------------------|-------------------------|-----------------------------|----------------|-----------------|----------------|-------------------------|----------|--------------------|--------|
| Principal Place of Business 1380 N COURTENAY PARKWAY MERRITT ISLAND FL 32953 | | | | Mailing Address 1380 N COURTENAY PARKWAY MERRITT ISLAND FL 32953 | | | | | | | | | | |
| 2. Principal Place of Business | | | | 3. Mailing Address | | | | | | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | |] СНЕСК Н | ERE IF MA | KING CHA | ANGES | | |
| City & State | | | City & State | | | | 4. | FEI Number | 59-3001 | 999 | | - | oplied For | \Box |
| Zip | Country | | | Zip | | Country | | Certificate o | f Status Desi | red [| | 75 Add | ditional | |
| | 6. Name | and Address of Current | Register | ed Agent | | T - | 7. | Name and A | ddress of N | ew Regist | ered Agen | <u> </u> | | ┥ |
| MICHA | ÆL M. S | | ب ^ت د | <u> </u> | | Name | 4 - 25. | T-0 | · | | ~ ° <u></u> | | | |
| 1380 NORTH COURTENAY PARKWAY MERRITT ISLAND, FL 32953 | | | | | | Street Address | s (P.O. E | Box Number | is Not Accep | table) | | | | |
| ÷ | | ., | | | | | | | | | | | | |
| | | | | | | City | | | | | FL Z | ip Cod | e | |
| the obliga | itions of regist | y submits this statement for ered agent. | the purp | pose of changing its i | egister | ed office or regist | tered ag | gent, or both, | in the State of | of Florida. | I am familia | ar with, | and accept | 1 |
| SIGNATURE | | or printed name of registered agent a | nd title it apr | NOTE: | Begistere | d Agent signature requi | irad ubaa s | rainatatine) | | | PATE | | | |
| Afte | er May 1, 200 | ! FEE IS \$150.00 3 Fee will be \$550.00 Florida Department of | | | - | | ion Campaig Fund Contrib | n Financin | | \$5.0 Added | 0 May Be to Fees | _ | | |
| 10. | | OFFICERS AND I | DIRECTORS 11. | | | | ΑE | DITIONS/CI | HANGES TO | OFFICERS | AND DIRE | CTORS | 3 IN 11 | ┪ |
| TITLE Name Street address City-St-Zip | 4370 STIL | Carolyn Y. Lwaters Drive Sland Fl 32952 | | ☐ Delete | | | | | | | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DAVIS, JANSON W 150 FORTENBERRY ROAD - VILLA A MERRITT ISLAND FL | | A A | | | į. | , | | | | □ c | hange | ☐ Addition | |
| TITLE NAME Street Address* City-St-Zip | D STALNAKE 699 W. CO COCOA B | ER M D, JEFFREY C OCOA-BEACH CAUSEW EACH FL | 'AY, SUI | ☐ Delete | | | | | TO LATER | | | hange | ☐ Addition | |
| TTLE IAME TREET ADDRESS HTY-ST-ZIP | D GARRISON 2380 COX COCOA FI | | | ☐ Delete | | | <u>.</u> | | | | C | hange | Addition | - |
| ITLE IAME TREET ADDRESS ITY-ST-ZIP | 4370 Stili | C STOREY, MICHAEL 4370 STILLWATERS DRIVE MERRITT ISLAND FL 32952 | | ☐ Delete | | T ADDRESS ST-ZIP | | | | | c. | hange | Addition | |
| ITLE IAME TREET ADDRESS | | | | ☐ Delete | TITLE NAME STREE | T ADDRESS | | | 7. | 170 | □ CI | nange | Addition | 1 |

CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JANUARY 10, 2003

321/452-0011

Daytime Phone #