FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

FIDELITY FUNDING SYSTEMS, INC.

(3)

Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



% RICHARD P. GREENE, P.A. 2455 E. Sunrise Blvd., Suite 905 FT. Lauderdale Fl 33304		% RICHARD P. GREENE, P.A. 2455 E. SUNRISE BLVD., SUITE 905 FT. LAUDERDALE FL 33304-3112				
					3. Date Incorporated or Qualified 04/08/1988	3a. Date of Last Report 05/21/1996
Principal Place of Business Section Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-2990554	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Countr 30	y 		Yes No
000	9. Name and Address of Curr	ent Registered Agent	81	I	10. Name and Address of New Reg	listered Agent
	EENE, RICHARD P. P.A.	ΛĒ	81	Name		
2455 E. SUNRISE BLVD., SUITE 905 FT. LAUDERDALE FL 33304				Street Address (P.O. Box Number is Not Acceptable) 83		
			84			■■ 85 Zip Code
<u> </u>	· · · · · · · · · · · · · · · · · · ·					FL
Office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	ate of Florida. Such change wa	is authorized b	v the corpora	poration submits this statement for the pu ation's board of directors. I hereby accept	urpose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registered				uired when reinslating)	DATE
12.		AND DIRECTORS	13.	eni signature jedo	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DECETE	1,1 TITLE			XX Change
NAME	DOROW, W.A., JR.		1.2 NAME			
STREET ADDRESS	4304 INTRACOASTAL DR		1.3 \$1REE	T ADDRESS	10222 Maramont Cou	rt
CITY-ST-ZIP	HIGHLAND BEACH FL		1.4 CITY -	ST-ZIP]	Richmond, Virginia	23222
TITLE		DELETE	2.1 TITLE			Change Addition
NAME			2 2 NAME			
STREET ADDRESS			2.3 ŞTREE	1 ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	S1-ZIP		
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME OTOGET 4 DODGES			3.2 NAME			
STREET ADDRESS				I ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 CHY-	ST-ZIP		Change Addition
NAME		E PERCIL	4.1 UILE 4.2 NAME			i i oπαμίδα □ i v00/li0t
STREET ADDRESS				I ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	51 TITLE	21.1"		Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE	:	☐ DELETE	61 TITLE	<u> </u>		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREE	I ADDRESS		
CITY ST- 7IP			64 CITY.	27.710		

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.

4/18/97

904-264-6070 x232