

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079921

FILED
Aug 07, 2006
Secretary of State

Entity Name: FLORIDA STATEWIDE MORTGAGE, INC.

Current Principal Place of Business:

19235 USH HWY 41 N
LUTZ, FL 33549

New Principal Place of Business:

19235 US HWY 41 N
LUTZ, FL 33549

Current Mailing Address:

PO BOX 807
LUTZ, FL 33548

New Mailing Address:

FEI Number: 59-3724932 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHULTZ, FRED
19235 HIGHWAY 41 NORTH
LUTZ, FL 33549 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LARKINS, BARBARA
Address: 19235 US HWY 41
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA W. LARKINS

D

08/07/2006

Electronic Signature of Signing Officer or Director

Date