

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109031

FILED
Apr 07, 2006
Secretary of State

Entity Name: FIDELITY MUTUAL MORTGAGE, INC.

Current Principal Place of Business:

420 US HWY 1
16
NORTH PALM BEACH, FL 33408

Current Mailing Address:

420 US HWY 1
16
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

420 US HWY 1
13
NORTH PALM BEACH, FL 33408

New Mailing Address:

420 US HWY 1
13
NORTH PALM BEACH, FL 33408

FEI Number: 81-0633759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, CAROLE L
420 US HWY 1
16
NORTH PALM BCH, FL 33408 US

Name and Address of New Registered Agent:

BURNS, WILLIAM R
420 US HWY 1
13
NORTH PALM BCH, FL 33408 US

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: WILLIAM BURNS

04/07/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BURNS, CAROLE L
Address: 420 US HWY 1 STE. 16
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BURNS, WILLIAM R
Address: 420 US HWY 1 STE. 13
City-St-Zip: NORTH PALM BEACH, FL 33408

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: WILLIAM BURNS

PRES

04/07/2006

Electronic Signature of Signing Officer or Director

Date