2006 FOR PROFIT CORPORATION ANNUAL REPORT

CO# GL# SUB ACCT AMOUNT
20 FILED Apr 28, 2006 08:00 AM Secretary of State
APPROVAL Clk TOTAL 150.00 DATE

DOCUMENT # P04000055172

1. Entity Name
FIDELITY PLAZA DEVELOPMENT, INC.

Principal Place of Business
631 US HWY 1
SUITE 406
NORTH PALM BEACH, FL 33408

Mailing Address
631 US HWY 1
SUITE 406
NORTH PALM BEACH, FL 33408

04042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0937368 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MACKEY, WALTER J JR
631 US HWY 1
SUITE 406
NORTH PALM BEACH, FL 33408

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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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MACKEY, WALTER J JR
STREET ADDRESS	631 US HWY 1, STE 406
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	ST
NAME	WILLIAMS, EDWARD S
STREET ADDRESS	631 US HWY 1, STE 406
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	
NAME	
STREET ADDRESS	
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05/06/06-80061-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Edward S Williams, EDWARD S WILLIAMS Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/24/06 Daytime Phone #