

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131743

FILED
Jan 03, 2007
Secretary of State

Entity Name: FIRST CONTINENTAL MORTGAGE SPECIALISTS, INC.

Current Principal Place of Business:

405 DOUGLAS AVENUE
SUITE 1505
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

455 DOUGLAS AVENUE
SUITE 1505
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 20-1638914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MICHAEL, CARVALHO G
1809 E. BROADWAY
307
OVIEDO, FL 32765 US

New Principal Place of Business:

445 DOUGLAS AVENUE
SUITE 1505
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

445 DOUGLAS AVENUE
SUITE 1505
ALTAMONTE SPRINGS, FL 32714 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MICHAEL, CARVALHO G
Address: 1809 EAST BROADWAY
City-St-Zip: OVIEDO, FL 32765

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICHAEL, CARVALHO G
Address: 445 DOUGLAS AVE SUITE #1505
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Change (X) Addition
Name: KAMINSKY, STEVE
Address: 445 DOUGLAS AVE #1505
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: MICHAEL G. CARVALHO

PD

01/03/2007

Electronic Signature of Signing Officer or Director

Date