

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132428

FILED
Apr 21, 2009
Secretary of State

Entity Name: LIBERTY COMMUNITY MORTGAGE, INC.

Current Principal Place of Business:

31564 US HIGHWAY 19 N
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

31564 US HIGHWAY 19 N
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 06-1733082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SICA, ALTA JANET S/T
3069 HOMESTEAD COURT
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

SICA, GARY A PRES
3069 HOMESTEAD COURT
CLEARWATER, FL 33759 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: GARY A. SICA

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SICA, GARY A
Address: 3069 HOMESTEAD COURT
City-St-Zip: CLEARWATER, FL 33759

Title: ST () Delete
Name: SICA, ALTA JANET
Address: 3069 HOMESTEAD COURT
City-St-Zip: CLEARWATER, FL 33759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ALTA JANET SICA

ST

04/21/2009

Electronic Signature of Signing Officer or Director

Date