

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000035386

FILED
Jan 12, 2006
Secretary of State

Entity Name: FIDELITY MORTGAGE DIRECT CORP.

Current Principal Place of Business:

PO BOX 1899
DELAND, FL 32721 US

New Principal Place of Business:

580 CAPE COD LANE
SUITE 2
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

PO BOX 1899
DELAND, FL 32721 US

New Mailing Address:

580 CAPE COD LANE
SUITE 2
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 20-2448767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINEDA, JONATHAN A
130 KENSINGTON AVENUE
DELAND, FL 32724 US

Name and Address of New Registered Agent:

PINEDA, JONATHAN A
958 CROSS CUT WAY
LONGWOOD, FL 32750 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: JONATHAN A. PINEDA

01/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PINEDA, JONATHAN A
Address: PO BOX 1899
City-St-Zip: DELAND, FL 32721 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PINEDA, JONATHAN A
Address: 958 CROSS CUT WAY
City-St-Zip: LONGWOOD, FL 32750 US

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: JONATHAN A. PINEDA

P

01/12/2006

Electronic Signature of Signing Officer or Director

Date