

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90067 045 ***158.75

DOCUMENT # P96000047738
1. Entity Name
PRIVATE MORTGAGE ACQUISITIONS CORPORATION



Principal Place of Business
**1520 BOTTLEBRUSH DR., SUITE #2
PALM BAY FL 32905**

Mailing Address
**PO BOX 38
MELBOURNE FL 32902-0038**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
200 S. HARBOR CITY BLVD. SUITE 203

3. Mailing Address
P.O. BOX 38

Suite, Apt. #, etc.
SUITE 203

Suite, Apt. #, etc.
#

City & State
MELBOURNE, FL

City & State
MELBOURNE, FL

Zip
32902

Country
USA

Zip
32902

Country
USA

4. FEI Number
59-3382839

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FREDRICK, DONALD A
1520 BOTTLEBRUSH DR., #2
PALM BAY FL 32905

7. Name and Address of New Registered Agent

Name
DONALD A. FREDRICK

Street Address (P.O. Box Number is Not Acceptable)
200 S. HARBOR CITY BLVD. #203

City
MELBOURNE

FL

Zip Code
32901

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]* - PRES. DATE **01-07-03**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
P	FREDERICK, DONALD A.	P.O. BOX 61659	PALM BAY FL 32906-1659	
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	DONALD A. FREDRICK, PRESIDENT.	P.O. BOX 38, MELBOURNE, FL	32902		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *[Signature]* - PRES. DATE **01-07-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)