FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT, OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000058676 (3)

FIDELITY TRUST, INC.

Principal Place of Business	Mailing Address
7606 BROOK FOREST DRIVE PENSACOLA FL 32514	7806 BROOK FOREST DRIVE PENSACOLA FL 32514-7802

FILED Jun 16 1997 8:00am Secretary of State

Principal Place of Business Mailing Address				L NEULL BOART BAINN 10110 BAIN 16616 BAIN 1861	
7606 BROOK F PENSACOLA F		7606 BROOK FOREST DR PENSACOLA FL 32514-78			
				3. Date Incorporated or Qualifi 07/12/1996	ed 3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	Garden Street	26 224 E. Gard	en Street	59-3390176	Not Applicable
Suite, Apt.	5	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State Pensacela F	:1	6. Election Campaign Financin	_ +
23 - Tensa c Zip	Country	71p	Country	Trust Fund Contribution	Added to Fees
24 3250	1 -	29 33501	A2U 08	Florida Statutes	for intangible tax under s. 199.032,
	9. Name and Address of Current		1001	10. Name and Address of New	
	RILAWYER CHARTERED		81 Name	Lynn T. Ferrie	
	ALMERIA AVENUE	Address (P.O. Box Number is Not Acce	ptable)		
COP	IAL GABLES FL 33134	007 Brook Forest 1	Stive		
			83		
			84 City)	85 Zip Code
44 5	40-44-007-000	1007 1500 51 11 0		Pensa cola	FL 33514
office or re	egistered agent, or both, in the State of	o! Florida. Such change was a	authorized by the corp	corporation submits this statement for toporation's board of directors. Thereby a	he purpose of changing its registered scept the appointment as registered
agent. I aç	n Itmiliar with, and accept the obliga	tions of, Section 607,0505, Fi	orida Statutes.	•	
SIGNATURE (on a re, typod of printed name of registered agen	NT Ferrie	TE Registered Agent's gnature	required when temetation	<u>6697</u>
12.	OFFICERS AND		13.		FFICERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1,1 Till.E		Change Addition
NAME	FERRIE, LYNN T		1.2 NAME		
STREET ADDRESS	7606 BROOK FOREST DRIVE		1.3 STREET ADDRESS	7607 Brock Forest De	iue.
CITY-ST-ZIP	PENSACOLA FL 32514		1.4 C/TY - ST - ZIP	Pensacola FL 32514	
TITLE		∐ DELETE	2 1 117LE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELEVE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		Change Muniton
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			34. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-7IP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-ST-ZIP		05.00
NAME		☐ DECETE	6.1 TITLE		Change L Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		İ
CITY-ST-ZIP			6.3 STREET ADDRESS	v.	ļ
14. 1 do hereb	y certify that the information supplied	with this filing does not quali	fy for the exemption st	ated in Section 119.07(3)(i), Florida Sta	tutes. I further certify that the
intormation	n indicated on this annual report or su	ippleniental annual report is t	true and accurate and	that my signature shall have the same leport as required by Chapter 607, Florid	egal effect as if made under path: that l