

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000045661

FILED
Mar 05, 2007
Secretary of State

Entity Name: FLORIDA CAPITAL MORTGAGE COMPANY

Current Principal Place of Business:

20 AIRPORT ROAD STE B
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

20 AIRPORT ROAD STE B
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 59-3447327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAAS, JOE
20 AIRPORT ROAD STE B
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

HAAS, JEFFREY
20 AIRPORT ROAD STE B
PALM COAST, FL 32164 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: JEFFREY HAAS

03/05/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: HAAS, JOE
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: MORRIS, RENEE
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: PAGAN, RANDY
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: V () Delete
Name: RAMSEY, KAREN
Address: 268 A PALM COAST PARKWAY NE
City-St-Zip: PALM COAST, FL 32137

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: HAAS, JEFFREY
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: VD (X) Change () Addition
Name: MORRIS, RENEE
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: VD (X) Change () Addition
Name: PAGAN, RANDY
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: VD (X) Change () Addition
Name: NORMAN, ANGELA
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

Title: VD () Change (X) Addition
Name: STONE, BEATRICE
Address: 20 AIRPORT ROAD STE B
City-St-Zip: PALM COAST, FL 32164

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: JEFFREY HAAS

PTSD

03/05/2007

Electronic Signature of Signing Officer or Director

Date