

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000057078

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ASSOCIATED MORTGAGE OF NORTH AMERICA, INC.

**Current Principal Place of Business:**

476 N. BABCOCK STREET  
SUITE 1  
MELBOURNE, FL 32935

**New Principal Place of Business:**

1900 S HARBOR CITY BLVD  
SUITE 342  
MELBOURNE, FL 32901

**Current Mailing Address:**

476 N. BABCOCK STREET  
SUITE 1  
MELBOURNE, FL 32935

**New Mailing Address:**

1900 S HARBOR CITY BLVD  
SUITE 342  
MELBOURNE, FL 32901

**FEI Number:** 59-3534665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BITTAR, DONALD A  
476 N BABCOCK STREET  
SUITE 1  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

BITTAR, DONALD A  
1900 S HARBOR CITY BLVD  
SUITE 342  
MELBOURNE, FL 32901 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:

04/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PDS  
Name: BITTAR, DONALD  
Address: 1900 S HARBOR CITY BLVD, SUITE 342  
City-St-Zip: MELBOURNE, FL 32901

Title: VP  
Name: BITTAR-COPELAND, CINDY  
Address: 1900 S HARBOR CITY BLVD, SUITE 342  
City-St-Zip: MELBOURNE, FL 32901

I hereby 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 all other like empowered.

SIGNATURE: DONALD BITTAR

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date