

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000062970

1. Entity Name
ACCELERATED MORTGAGE COMPANY



Principal Place of Business
780 DELTONA BLVD.
UNIT 107
DELTONA, FL 32725

Mailing Address
780 DELTONA BLVD.
UNIT 107
DELTONA, FL 32725



05062008 No Chg-P CR2E034 (11/05)

4. FEI Number
22-3596239

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PARENTE, ANGELA
105 ALEXANDRA WOODS DR.
DEBARY, FL 32713

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

000000951608

06/04/08-00042-023 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES PARENTE, ANGELA M 105 ALEXANDRA WOODS DR. DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARLICK, EDWARD A 104 ALEXANDRA WOODS DR. DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PARENTE, PHYLLIS 16 LANSING AVE WARWICK, RI 02888
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

ANGELA PARENTE

5-6-08