

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000064846

**FILED  
Apr 30, 2012  
Secretary of State**

**Entity Name:** AETNA MORTGAGE COMPANY OF FLORIDA, INC.

**Current Principal Place of Business:**

3733 UNIVERSITY BLVD, W., STE 212  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

3733 UNIVERSITY BLVD, W., STE 212  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

FEI Number: 65-0851749      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NEEDLE, DAVID  
3733 UNIVERSITY BLVD, W., STE 212  
JACKSONVILLE, FL 32217 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: NEEDLE, DAVID  
Address: 3733 UNIVERSITY BLVD, W., STE 212  
City-St-Zip: JACKSONVILLE, FL 32217 US

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: DAVID NEEDLE

Electronic Signature of Signing Officer or Director

PRES

04/30/2012

Date