

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000076376

1. Entity Name

FLORIDA MORTGAGE CORPORATION



Principal Place of Business

2420 ENTERPRISE ROAD
STE 105
CLEARWATER, FL 33763 US

Mailing Address

2420 ENTERPRISE ROAD
STE 105
CLEARWATER, FL 33763 US



01112007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3530621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KULYK, STEVEN
2420 ENTERPRISE ROAD - STE 105
CLEARWATER, FL 33763

**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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

100000586267
01/16/07-00046-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	KULYK, STEVEN
STREET ADDRESS	2420 ENTERPRISE ROAD-SUITE 105
CITY-STATE-ZIP	CLEARWATER, FL 33763

TITLE	
NAME	
STREET ADDRESS	
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CITY-STATE-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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Steven Kulyk **STEVEN KULYK** 1-10-07 727-791-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #