2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 23, 2001 8:00 am DOCUMENT # P98000090940 **Secretary of State** FIDELITY MORTGAGE LOANS AND INVESTMENTS, INC. 01-23-2001 90047 029 ***150.00 Principal Place of Business Mailing Address 600 BYPASS DR. SUITE 114 600 BYPASS DR. SUITE 114 CLEARWATER FL 33764 CLEARWATER FL 33764 102114 2. Principal Place of Business 3. Mailing Address Central A 4401 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3540227 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent BLEVINS, RICHARD G 600 BYPASS DR. SUITE 114 **CLEARWATER FL 33764** Central Are # B 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable FILE-NOW!!!-FEE-IS:\$150:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Richard G. Bleving Change TITLE ☐ Delete BLEVINS, RICHARD G STREET ADDRESS 600 BYPASS DR. SUITE 114 STREET ADDRESS CITY-ST-ZIP **CLEARWATER-FL 99764** CITY-ST-ZIP DVPT TITLE ☐ Delete TITLE BLEVINS, TAMMY NAME NAME 600 BYPASS-DR: SUITE 114 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GLEARWATER FL 33764** CITY-ST-7IP ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE .NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Blovins 1-11.2001