

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000034082

FILED
Jan 03, 2008
Secretary of State

Entity Name: FIDELITY MORTGAGE SERVICES, INC.

Current Principal Place of Business:

101 WYMORE ROAD
SUITE 500
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

101 WYMORE ROAD
SUITE 500
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3569855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERGO, NICHOLAS D
674 KEENELAND PIKE
LAKE MARY, FL 32746 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MERGO, NICHOLAS D
Address: 674 KEENELAND PIKE
City-St-Zip: LAKE MARY, FL 32746

Title: P () Delete
Name: TRIVELLI, MICHAEL J
Address: 2349 ROANOKE CT
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: TRIVELLI, MICHAEL J
Address: 1460 LANGHAM TERRACE
City-St-Zip: HEATHROW, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHAEL J TRIVELLI

PRES

01/03/2008

Electronic Signature of Signing Officer or Director

Date