2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P99000071629

Entity Name: FAIR CREDIT MORTGAGE INC.

Current Principal Place of Business:

7289 GARDEN ROAD
STE 115
WEST PALM BEACH, FL 33404

New Principal Place of Business:

319 CLEMATIS STREET
STE 412
WEST PALM BEACH, FL 33401

Current Mailing Address:

7289 GARDEN ROAD
STE 115
WEST PALM BEACH, FL 33404

New Mailing Address:

319 CLEMATIS STREET
STE 412
WEST PALM BEACH, FL 33401

FEI Number: 65-0941458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DONOHUE, PAUL L JR
8605 DOVERBROOK DR
PALM BEACH GARDENS, FL 33410 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:	CEO	( ) Delete
Name:	DONOHUE, PAUL L JR	
Address:	8605 DOVERBROOK DR	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	P	( ) Delete
Name:	GRANDIZIO, STEVE	
Address:	141 CARPENTER ST	
City-St-Zip:	PHILADELPHIA, PA 19147	
Title:	D	( ) Delete
Name:	MILLER, MATT	
Address:	11478 SANDERLING DR.	
City-St-Zip:	WELLINGTON, FL 33414	
Title:	D	(X) Delete
Name:	PREMUROSO, RON	
Address:	ONE CAMBRIA RD. E.	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	D	( ) Delete
Name:	SIMS, BEN	
Address:	PO BOX 1269	
City-St-Zip:	OKEECHOBEE, FL 34973	
Title:	D	( ) Delete
Name:	MULLEN, JEFF	
Address:	7 CAMPUS BLVD.	
City-St-Zip:	NEWTOWN SQUARE, PA 19073	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	GRANDIZIO, STEVE	
Address:	132 ALTER STREET	
City-St-Zip:	PHILADELPHIA, PA 19147	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: PAUL DONOHUE CEO 04/27/2007
Electronic Signature of Signing Officer or Director Date