

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 8:00 am
Secretary of State

04-14-2005 90085 023 ***150.00

DOCUMENT # P99000071629					
1. Entity Name FAIR CREDIT MORTGAGE INC. <i>dba Friendly Mortgage</i>					
Principal Place of Business 7289 GARDEN ROAD STE 115 WEST PALM BEACH, FL 33404			Mailing Address 7289 GARDEN ROAD STE 115 WEST PALM BEACH, FL 33404		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0941458	
Zip		Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DONOHUE, PAUL L JR 8605 DOVERBROOK DR PALM BEACH GARDENS, FL 33410			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES DONOHUE, PAUL 8605 DOVERBROOK DR PALM BEACH GARDENS, FL 33410	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP FETSCHER, ERIC 325 LEGARE CT 103 JUPITER, FL 33458	☐ Delete	" " 103 Florence Dr " "	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLER, MATT 11478 SANDERLING DR. WELLINGTON, FL 33414	☐ Delete	VP Steve Grandizio 141 Carpenter St Philadelphia, PA 19106	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PREMUROSO, RON ONE CAMBRIA RD. E. PALM BEACH GARDENS, FL 33410	☐ Delete	_____ _____ _____	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SIMS, BEN 208 NORTH PARROTT AVENUE OKEECHOBEE, FL 34972	☐ Delete	_____ _____ _____	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MULLEN, JEFF 7 CAMPUS BLVD. NEWTOWN SQUARE, PA 19073	☐ Delete	_____ _____ _____	☐ Change ☐ Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE:			Paul Donohue, Pres 4/11/05 861 848 1140		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		