FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

21



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028121 (8)

THE REYNOLDS FINANCIAL GROUP, INC.

Principal Place of Business	Mailing Address	
4501 N 9TH ST NAPLES FL 33940 US	4501 N 9TH ST Naples FL 33940 Us	

2a. Mailing Address

Suite, Apt. #, etc.

#212

FILED Mar 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

04/10/1995

65-0567585

5. Certificate of Status Desired

City & State			City & S	City & State					6. Election Campaign Financing \$5.00 May Be			
23		28	28					Trust Fund Contribution Added to Fees				
Zip	}	Country	Zip]	Country				8. This corporation owes or has paid the current year Intangible			
24		25	29		30				Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent												
REYNOLDS, NANCY K				ļ	81	Name			ļ			
4501 N 9TH STREET Suite 212 Naples Fl 33940					82	Street A	Addres	ss (P.O. Box Number is Not Acceptable)				
					_							
					83							
•					84	City		■. 85 Zip	Code			
						\perp			FL 63 CP			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE												
Signature, typod or printed name of registered agent and little if applicable (NOTE Registered						Ager	l signature	regulred				
12.	1 K	OFFICERS	AND DIRECTORS	DECEST.	13,				ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			
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14. I hereby c	ertify that the	information supplie	d with this filing does	s not qualify for	the exer	mnti	on state	d in Se	ection 119.07(3)(i), Florida Statutes. I further certify that the	information		
indicated on this annual report or supplemental annual 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 12 or Block 13 if changed for on an attachment with an address.												