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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000035500 (4)

FINNEY, INC.

## **FILED** Feb 25 1998 8:00am Secretary of State

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Principal Place of Business		Mailing Address				S VERNIERS FIN TRUST STILL SOLLS BRITI BRIDS THAN BILDS BILLS BRIDS BRIDS BRIDS BRIDS BRIDS BRIDS BRIDS BRIDS		
ŕ	EY SHORES ROAD	=	28637 SHIRLEY SHORES ROAD					
TAVARES FL 32778			TAVARES FL 32778			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	OF AUE	
						05/05/1995		
2. Principal P	lace of Business	2a. Mailing Addr	ess			4. FEI Number	TT	Applied For
21		26				59-3299641		Not Applicable
Suite, Apt.	#, etc	Suite. Apt. #,	etc.			5. Certificate of Status Desired	<b>—</b> —	Additional
22		27				6. Certificate of Status Desired	Fee	Required
City & State	е	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28	- T - 0-			Trust Fund Contribution		d to Fees
Zip	Country	Zo	<u></u> ⊢¬	untry		This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year ☐ Yes	Intangible No
24	25 9. Name and Address of Curre	29  nt Registered Agent	30	T	<del></del>	10. Name and Address of New Registered		110
211				81	Name			
FINNEY, DAWN								
28637 SHIRLEY SHORES ROAD TAVARES FL 32778				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
IA	VARES PL 32778			83				
				Ш				
				84	City	FL	85   Zi	p Code
11 Pursuant	to the provisions of Sections 607 05	02 and 607 1508. Flora	da Statutes, the a	bove	e-named co	progration submits this statement for the purpose of	f changing	its registered
office or r	registered agent, or both, in the State	of Florida, Such chan	ge was authorize	d by	the corpor	orporation submits this statement for the purpose cration's board of directors. I hereby accept the app	ointment	as registered
	im familiar with, and accept the oblig	ations of Section 607.	USUS, Florida Sta	แบเอร	<b>3</b> .	. //.	he	•
SIGNATURE	Signature byped or preded mane of regulatered as	Manay	(NOIE Register	id Age	ent signature reg	guired when reinstating) ATE	1/10	<u> </u>
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS ANI	DIRECT	ORS IN 12
TITLE	D	DE	LETE 1.11	TLE			Chang	e Addition
NAME	FINNEY, DAWN		1.21	IAME				
STREET ADORESS	28637 SHIRLEY SHORES RO	)AD	1.3 3	STREET	ADDRESS			
CITY-ST-ZIP	TAVARES FL 32778		1.4 (	CITY-S	T-ZIP			
TITLE	D	☐ DE	LETE 2.11	ITLE			Chang	e 🔲 Addition
NAME	FINNEY, CHRISTOPHER		2.21	IAME				
STREET ADDRESS	28637 SHWRLEY SHORES RO	DAD	2.33	TREET	ADDRESS	•		
CITY - ST - ZIP	TAVARES FL 32778			CITY - S	ST - ZIP			
TITLE		DE	ELETE 3.11	TITLE			Chang	e 🔲 Addition
NAME			3.21	AME				
STREET ADDRESS			3.3 5	STREET	ADDRESS			
CITY-ST-ZIP					ST-ZIP			F 1
TITLE		DI 🔲		TITLE			Chang	e 🔲 Addition
NAME				NAME				
STREET ADDRESS			4.3 5	STREET	ADDRESS			
CITY-ST-ZIP				R-YIK	T - 7(P	The state of the s		
TITLE		□ DI			-		Chang	e 🔲 Addition
NAME			5.21	NAME				
STREET ADDRESS			5.33	STREET	ADDRESS			
CITY-ST-ZIP				CITY-S	iT - ZIP			
TITLE		□ DI	ELETE 61	IITLE			Chang	e Addition
NAME	<b>\</b>		621	NAME				
STREET ADDRESS			633	STREET	ADDRESS			
CITY-ST-ZIP			6.4	CITY-S				
			P. C		A	in Continu 440 07/2V/i) Florido Statutas, I furthas a		he information

indicated on this annual report or supplied with this interpret on exemption stated in Section 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, or on an attachment with an artidress.