

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

FILED  
Jan 29 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000096903 (5)  
1. Corporation Name

AFFINITY CAPITAL CORPORATION

Principal Place of Business

Mailing Address

2401 PGA BLVD #110  
PALM BCH GARDENS FL 33410  
US

251 SOUTH COUNTY ROAD  
PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1996

4. FEI Number

65-0713233

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30 ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2401 PGA Blvd. #110  
Suite, Apt. #, etc.

22 City & State

27 City & State  
28 Palm Beach Gardens, FL

23 Zip Country

29 33410 30 USA

9. Name and Address of Current Registered Agent

BROWN, JONNA ESQ.  
C/O DUNWODY WHITE & LANDON, P.A.  
251 SOUTH COUNTY ROAD  
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME BROWN, RORY A  
STREET ADDRESS 13345 ROLLING GREEN ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL 33408

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

P ☒ Change ☐ Addition

TITLE D ☐ DELETE  
NAME BROWN, JUDITH A  
STREET ADDRESS 13345 ROLLING GREEN ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL 33408

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V ☐ DELETE  
NAME MAY, THOMAS  
STREET ADDRESS 18710 SE RIVER RIDGE RD  
CITY-ST-ZIP TEQUESTA FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Senior V/S/T ☒ Change ☐ Addition

TITLE V ☐ DELETE  
NAME ROZOWSKY, IVOR T  
STREET ADDRESS 19 BERMUDA LAKE DR  
CITY-ST-ZIP PALM BCH GARDENS FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

MD ☒ Change ☐ Addition

TITLE V ☐ DELETE  
NAME WILHOIT, STEPHEN C  
STREET ADDRESS 17056 BAY ST  
CITY-ST-ZIP JUPITER FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

MD ☒ Change ☐ Addition

TITLE V ☐ DELETE  
NAME MELLISH, ROBERT W  
STREET ADDRESS 20205 GLENMOOR DR  
CITY-ST-ZIP WEST PALM BCH FL

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 address.

SIGNATURE: Thomas C. May - May 11/2/98 561-776-8860

CR2E034 (10/97)