## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

453206

(5)

FILED Aug 12 1996 8:00 am Secretary of State

CENTRAL FLORIDA MORTGAGE AND INVESTMENT CORP.	
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Principal Place of Business Mahing Address					IIO BIII BIO	11 D(B(  8101)	01814 81614 61614 4081				
1515 S ATLANTIC AVE P.O. BOX 615			1515 S ATLANTIC AVE P.O. BOX 615								
COCOA BEACH FL 32931			COCOA BEACH FL 32931			3. Date Incorporated or Qualified 3a. Date of Last Report 05/17/1974 05/01/1995					
2. Principal Place of Business  21  Suite, Apt. #, etc.  22  City & State  23			2a. Mailing Address   26				4. FEI Number 59-2179888			Applied For Not Applicable	
							5. Cert ficate of Status Desired		\$8.75 Additional Fee Required		
							Election Campaign Financing     Trust Fund Contribution	<b>\$5.00</b> May Be Added to Fees			
Ζφ <b>24</b>	Country 25	29	Ζφ	30 Cou	ntry		8. This corporation has liability for in Florida Statutes		tax under	s 199.032,	
	g. Name and Address of Currer	t Registe	ered Agent				10. Name and Address of New R	egistere	d Agent		
					81	Name					
HARDICK, RUDOLPH L. JR.					82 Street Add		ress (P.O. Box Number is Not Acceptable)				
1515 S BOX 32	ATLANTIC AVE				83						
	A BEACH FL 32931										
0000	TOLION / L GAUGY				84	City		F	L 85 7	Zip Gode	
familiar with	and accept the obligations of Sect gratic (group (missions existence) sec- Officers AN	ion 607.0 	i505, Florida Statute	is			and of directors. Thereby accept the approximation remains an approximation of the second sec	DATÉ			
TITLE	PD		☐ DELETE	111	ITLF	···· .··· .·· .·· .·· .· .· .· .· .· .·			☐ Change	e 🔲 Addition	
NAME	HARDICK, RUDOLPH			1.2 M	AM:						
STREET ADDRESS	1515 S ATLANTIC AVE			138	BEET	ADDRESS					
CITY - ST - ZIP	COCOA BEACH FL		FTI CELEN			iT - ZiP			<u> </u>	FT1 44455	
TITLE	STD	v	DEFEIF	2.11		-			Change	e 🔲 Addition	
NAME STREET ADDRESS	GOODRICH, MONTGOMER 140 MIWNA LANE	i f		22 N		ADDRESS					
CITY - ST - ZIP	MERRITT ISLAND FL					11 - 71P					
TITLE	VPD ICY		DELETÉ	3 1 1		``. <del>. •</del>			Change	e 🔲 Addition	
NAME	HARDINA, MICHAEL			32N	AME						
STREET ADDRESS	1254 LANE DRIVE			335	TREE	I ADDRESS					
CITY - ST - ZIP	COCOA FL		ED BOLEN			ST - ZIF				. El Aures	
THILE			□ DELETE	4 1 1					☐ Chang	e 🔲 Addition	
NAME STREET ADORESS				42N		ADDRESS					
CITY-ST-ZIF						ST - ZIP					
TITLE			☐ DELETE	5 1 7					Chang	e 🔲 Addition	
NAME				5 2 N	AMÉ						
STREET ADDRESS				538	TREET	ADDRESS					
CITY-ST-ZIP			ED no ere			ST - ZIP					
THILE			☐ DELETE	6.17		ĺ			Chang	e 🔲 Add tion	
NAME				62 N							
STREET ADDRESS						I ADDRESS					
14 I do beceby	cert to that the information supplied	wato Inis	filma is voluntardy fo			SE-ZIP	for the exemption stated in Section 119	07(3)(k)	Florida Sta	tutes. I forther	

4. To hereby description the information support with this arms a supplemental and does not quality for the exemption stated in section 119.07(s)(k), Florida Statutes. Turner certify that the information indicated on this arms 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 6C7, Florida Statutes; and that my name appears in Block 12 or Block 13 it or aligned, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

467 784 441)