

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sanora B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 3-15-96

B-2307

MC

DOCUMENT # 646788

(0)

1. Corporation Name

MONEY CONSULTANTS, INC.



Principal Place of Business

2477 STICKNEY PT. RD. STE. 210A
SARASOTA FL 34231

Mailing Address

2477 STICKNEY PT. RD. STE. 210A
SARASOTA FL 34231

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CHRISTNER, JOANNE
2425 NASSAU ST.
SARASOTA FL 34231

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

J. D. CHRISTNER

3-11-96

Date

12. OFFICERS AND DIRECTORS

TITLE	PST	☐ DELETE
NAME	CHRISTNER, JOANNE	
STREET ADDRESS	2425 NASSAU ST.	
CITY- ST- ZIP	SARASOTA, FL 00000	
TITLE	V	☐ DELETE
NAME	CHRISTNER, MICHAEL	
STREET ADDRESS	3120 ARCH DRIVE	
CITY- ST- ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY- ST- ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY- ST- ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY- ST- ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY- ST- ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY- ST- ZIP	☐ Change ☐ Addition

SIGNATURE:

J. D. CHRISTNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
J. D. CHRISTNER PRESIDENT

3-11-96

(941) 921-7777

Date

Daytime Phone #

CR2E034 (12/95)