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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

720906

(7)

A, INC.  Principal Place of Business  Mailing Address  P O BOX 4997  US  DESCRIPTION  A Mailing Address  P O BOX 1193  A Financial Place of Business  A Mailing Address  D Box 1193  A Financial Place of Business  A Mailing Address  D Box 1193  A Financial Place of Business  A Mailing Address  D Box 1193  A Financial Place of Business  A Mailing Address  Substancial Place of Business  A Mailing Address  D Box 1193  A Financial Place of Business  A Mailing Address  Substancial Place of Business  A Mailing Address  D Box 1193  B Box 1293  B Box 1294  B Business  B Business  City 4 State	THE FINANCIAL ANALYSTS SOCIETY OF CENTRAL FLORID											
Principal Placed of Business   Mailing Address   P. O. BOX 1925   US   3. Date Incorporated or Qualified   OS/101/971   4. FER Number   Applicable   DS/101/971   DS/10								1 (60)	1	IIO ONE BIOLI	DEGEN GIBEL BEREI	
PO BOX 4039 SARASITA FL 3420-097 PO BOX 1198 TAMPA FL 33901 US  2 Principal Place of Business 2 A Malling Address 2 Suite, Apt. #, etc. 2 Suite, Apt. #, etc. 2 City & State 3 Country 4 Personal Property Tax June Language Prop												
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US    Country   Secretary   Se	The state of the s							3. Date Incorpo	rated or Qualified	đ		
2. Principal Place of Business   2a. Mailing Address   5. Certificate of Status Desired   \$8.75 Addition   \$	1								1971			
2 Principal Place of Business   2a. Mailing Address   2b.   2a.   2b.						0000		<del></del>				
Suite, Apt. #, etc.  City & State  Zip  City & State  Zip  Country  Zip  Zip  Country  Zip  Zip  Zip  Zip  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	2. Principal I	Place of Business	2a.	Mailing Address				59-659	2262		<del></del>	• • • • • • • • • • • • • • • • • • • •
Suite, Apt. #, etc.	21		26	<del>,</del>			5. Certificate of	Statús Desired		,		
City & State    City & State   City	Suite, Apt. #, etc. Suite, Apt. #, etc.							6. Election Cam	paign Financing			
28   29   30   20   30   30   30   30   30   30		te	Titur & Choto									
Zip Country Zip Country Zip Country			28	<u>⊢</u> ¬								
25    26    30    Personal Property Tax due June 30.   Yes   Xe No.   No.   Name and Address of No.   Registered Agent	Zip	Country	20]			Country		8. This corporati	on owes or has a			ntangihla
HOLLIDAY, JEANNE  % INVEST FINANCIAL CORP 2701 N ROCKY POINT DR 7TH FL TAMPA FL 33607  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation subhits 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 corporations between the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation 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 corporations between directors. In recty accept the appointment as registered agent and familiar with fund actions to registered agent and familiar with fund actions to registered agent and familiar with fund actions to the provisions of Section 617,0503, Florida Statutes, the above-named corporations between the purpose of changing its registered agent and familiar with fund actions to the provisions of Section 617,0503, Florida Statutes, the above-named corporations between the purpose of changing its registered agent and familiar with fund actions of Section 617,0503, Florida Statutes, the above-named corporation statement for the purpose of changing its registered agent and familiar with fund actions of Section 617,0503, Florida Statutes, the above-named corporation statement for the purpose of changing its registered agent and familiar with fund actions of Section 617,0503, Florida Statutes, the above-named corporation statement for the purpose of changing its registered agent and familiar with fund action of Section 617,0503, Florida Statutes, the above-named corporation statement for the purpose of changing its registered agent and familiar with fund action for the purpose of changing its registered agent and familiar with fund action for the purpose of changing its registered agent and familiar with fund action for the purpose of Section 617,0503, Florida Statutes, the above-named corporati	24				30							
HOLLIDAY, JEANNE % INVEST FINANCIAL CORP 2701 N ROCKY POINT DR 7TH FL TAMPA FL 33607  84 City FL ST JD Code THE provisions of Sections 617,0502 and 617.1508, Florida Statutes, the above-named corporation subfinite this statement for the purpose of changing its registered office or registered agent or both, in the Bate of Borida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in minimizer with a depert the diplicantly of, Section 617.0503, Florida Statutes, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in minimizer with a depert the diplicantly of, Section 617.0503, Florida Statutes.  SIGNATURE Signature  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE D D DELETE 11. TITLE D D DELETE 21. TITLE D D DELETE 31. TITLE D		9. Name and Address	of Current Regist	ered Agent		me 1:		10. Name and A	ddress of New F	Registered	Agent	
SINVEST FINANCIAL CORP 2701 N ROCKY POINT DR 7TH FL TAMPA FL 33807  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation subfails this statement for the purpose of changing its registered agent or both, in the Bate of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in a maintain with an adapt; the displayable, of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and marked agent and the appointment as registered segment and adapt the appointment as registered agent and adapt the appointment as registered segment and appointment as registered agent and adapt the appointment as registered agent a	1101 (PAN PRAISE					Name	Ja	-ck s	Rade	سسبرسا		
2701 N ROCKY POINT DR 7TH FL TAMPA FL 33607  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation subthits this statement for the purpose of changing its registered agent. I am familiar with and actept the briggisteries of the provisions of Section 617,0503, Florida Statutes.  SIGNATURE									er is Not Accept	able)		
TAMPA FL 33607  11. Pursuant to the provisions of Sections 617,0502 and 617.1508, Florida Statutes, the above-named corporation sust his statement for the purpose of changing is registered office or registered agent or bop, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and another provisions of Section 617.0502, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  D D DELETE  1.1 TILE  D D DELETE  2.2 TIME  BRYAN, ALICIA L  2.2 NAME  STREET ADDRESS  CITY-57-2PP  TAMPA FL  D DELETE  2.4 OFFICERS AND DIRECTORS.  1.4 ORTY-57-2PP  TAMPA FL  D DELETE  3.2 NAME  STREET ADDRESS  CITY-57-2PP  TAMPA FL  D DELETE  3.3 STREET ADDRESS  CITY-57-2PP  TAMPA FL  D DELETE  3.4 ORTY-57-2PP  TAMPA FL  D DELETE  3.4 ORTY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  D Change Addition  NAME  STREET ADDRESS  CITY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  ACMY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  ACMY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  D Change Addition  Addition  NAME  STREET ADDRESS  CITY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  ACMY-57-2PP  TAMPA FL  D DELETE  3.5 TIME  D Change Addition  Addition  ACMY-57-2PP  TAMPA FL  D DELETE  5.1 TIME  D Change Addition  Addition  ACMY-57-2PP  TAMPA FL  D DELETE  5.1 TIME  D Change Addition  Addition  ACMY-57-2PP  TAMPA FL  D Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS. IN 12  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  CITY-57-2PP  TAMPA FL  D Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.  1.4							<u> </u>	12 Ea	516 7	700 CC	<u>.                                    </u>	
11. Pursuant to the provisions of Sections 817,0502 and 617.1508. Florida Statutes, the above-named corporation's board of changing it end of changing it end of changing it end of changing it end of special statutes.  SIGNATURE  SIGNATURE  SIGNATURE  DOFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  DO DELETE  1.1 TITLE  DO DELETE  1.2 NAME  SIRRET ADDRESS  CITY-57-2PP  TAMPA FL  DO DELETE  2.3 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  2.4 COTY-57-2PP  TOTALE  DO DELETE  3.3 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  3.4 COTY-57-2PP  TOTALE  DO DELETE  3.5 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  3.5 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  3.5 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  3.1 TITLE  DO DELETE  3.2 NAME  3.3 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  3.3 STREET ADDRESS  CITY-57-2PP  TOTALE  DO DELETE  4.1 TITLE  DO DELETE  5.1 TITLE  DO DELETE	TAMPA FL 33607					94 City		- · ·			12-11-5-	
Signature, hyped or plinted rather or registeding agers and talle if applicable.   (ROTE: Registered Agent signature required when reinciding)   DATE						City	La	- u- De-	•	FI	_ 85 Zip	で 3647
Signature, hyped or plinted rather or registeding agers and talle if applicable.   (ROTE: Registered Agent signature required when reinciding)   DATE	<ol> <li>Pursuant office or</li> </ol>	to the provisions of Sections registered agent or both, in	s 617,0502 and 61 the State of Florid	tes, the at	ove-named	corpor	ration submits this	statement for the	purpose o	of changing	its registered	
Signature, hyped or plinted rather or registeding agers and talle if applicable.   (ROTE: Registered Agent signature required when reinciding)   DATE	agent. I am familiar with and adcept the odligations of, Section 617.0503, Florida Statutes.											
12.	SIGNATURE		m = m = m	~ ~ ~ ~	ーレッシ	~ 1 C	س سا	0 -		0/5	<u>z</u>	
NAME	12.					- igoni orginalis	104202		ANGES TO OFF	ICERS AN	D DIRECTO	RS,IN 12
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TAMPA FL		-			1.2 NA	ME						
TITLE												
NAME   BRYAN, ALICIA L   22 NAME   STREET ADDRESS   2451 N MCMULLEN BOOTH RD   23 STREET ADDRESS   2.4 CITY-ST-ZIP   CLEARWATER FL   2.4 CITY-ST-ZIP		**************************************									T 0	Later
STREET ADDRESS   CLEARWATER FL   2.4 CITY-ST-ZIP		<del>-</del>				<b>.</b>					Change	Addition
CITY-ST-ZIP   CLEARWATER FL   2,4 CITY-ST-ZIP												
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STREET ADDRESS   2701 NORTH ROCKY POINT DRIVE 7TH FLOOR   3.3 STREET ADDRESS   1.7	TITLE	D		☐ DELETE							Change	☐ Addition
TAMPA FL   3.4. CITY-ST-ZIP   TAMPA FL   3.4. CITY-ST-ZIP	NAME	HOLLIDAY, JEANNIE I	L.		3.2 NA	ME .						
TITLE   D	STREET ADDRESS					IEET ADDRESS	: ' '	÷. ** '				
NAME					3.4. CIT	Y-ST-ZIP	_					
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NAME LANE, BARBARA I 6,2 NAME			<u></u>	DELETE							Channa	Addition
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			UTH									

CITY-ST-ZIP ST. PETERSBURG FL

14. I hereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE:

**FILED** 

Feb 03 1998 8:00am

Secretary of State