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

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

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 853429

(9)

ACKER, WOLMAN SECURITIES CORP.

**FILED** Feb 09 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
110 EAST GRANADA BLVD. 110 EAST GRANADA BLVD.						
SUITE 101		SUITE 101			DO NOT WRITE IN THIS SPACE	
ORMOND BEACH FL 32176 ORMOND BEACH FL 32176			76		3. Date Incorporated or Qualified	
					07/12/1982	
9 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			22-2289651 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.			S8.75 Additional	
22	27			5, Certificate of Status Desired Fee Required		
City & State	City & State	ity & State		6. Election Campaign Financing \$5.00 May Be		
23		28	<b></b>		Trust Fund Contribution Added to Fees	
Zip	Country	Ζŧp	Cour	ntry	This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30. Yes X No  10. Name and Address of New Registered Agent	
g, Name and Address of Current Registered Agent  ACKED DIRECTL C 81					10. Name and Address of New Registered Agent	
	KER, RUSSELL S.			O Nam	ran is	
110 EAST GRANADA BLVD. SUITE 101				82 Street Address (P.O. Box Number is Not Acceptable)		
	MOND BCH. FL 32176		ŀ	83		
Un	MUND BUT. FL 32170		L			
				64 City	City B5 Zip Code	
44 Pureuant t	to the provisions of Sections 607 050	2 and 607 1508. Florida Statut	es the ah	ove-name	amed corporation submits this statement for the purpose of changing its registered	
office or re	egi <b>ste</b> red agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was a pations of, Section 607.0505, Florida.	authorized orida Statu	by the co ites.	e corporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Stonature, typed or printed name of registered ag	BION	- Decistored	Agont pigost	ignature required when reinstalling) DATE	
12.		ID DIRECTORS	13.	Ağeril şiğilalı	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	DELETE	1.1 70	 LE	☐ Change ☐ Addition	
NAME	ACKER, RUSSELL S.		1.2 NA	ME		
STREET ADDRESS	245 OCEAN SHORE BLVD		1.3 ST	REET ADDRESS	DRESS	
CITY-ST-ZIP	ORMOND BEACH FL		1.4 C(I	Y-ST-ZIP	re	
TITLE	VO	DELETE	21 117	LE	Change Addition	
NAME	ACKER, JULIA C.		2.2 NA	ME		
STREET ADDRESS	245 OCEAN SHORE BLVD		2.3 STF	EET ADDRESS	DRESS	
CITY-ST-ZIP	ORMOND BEACH FL		2. 4 CF	IY-ST-ZIP	MP .	
TITLE		DELETE	3.1 TIT	LE	☐ Change ☐ Addition	
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 STF	EET ADDRESS	VRESS	
CITY-ST-ZIP			3.4. C(1	Y - ST - ZIP		
TITLE		☐ DELETE	4.1 TIT	LE	Change Addition	
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 S1F	reet address	PRESS	
CITY-ST-ZIP				Y - ST - 71P	P	
TITLE		☐ DELETE	5.1 TiT	LE	☐ Change ☐ Addition	
NAME			5.2 NAI	ŊE		
STREET ADDRESS			5.3 STF	REET ADDRESS	PRESS	
CITY-ST-ZIP				Y - ST - 71P		
TITLE		DELETE	6.1 T(T)	LE	☐ Change ☐ Addition	
NAME			6.2 NA	NE		
STREET ADDRESS			6.3 STF	EE1 ADDRESS	PRESS	
CITY-ST-ZIP			6.4 CIT	Y - ST - ZIP	P	

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 changes or on an attachment with an address.

9011.1.71