

CORPORATION
ANNUAL REPORT

1993-1995



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED *[Signature]*
AND *[Signature]* 6227 S.F.C.
FILED

95 MAY -1 AM 10:25

1. Name and Mailing Address of Corporation: **DOCUMENT # F16202 (6)**
SOUTHEAST FINANCIAL GROUP OF FT. LAUDERDALE, INC.
~~6747 FOX HOLLOW DR - A~~
BOCA RATON FL 33486-0688

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

If above mailing address is incorrect in any way, list through incorrect address(es) and enter correction in Block 2.

FILING FEE \$200.00
ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. Date Incorporated or Qualified **01/26/1981**
3a. Date of Last Report **08/20/1992**

4. FEI Number **592054354**
Accepted For Next Annual Report

5. Certificate of Status Desired ☐ \$b 75

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **\$138.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. (19)1112, Florida Statutes ☒ Yes ☐ No

2. Mailing Address
21 **5946 Patio Dr.**
State, Apt. #, etc.
22 **Boca Raton FL**
City & State
23 **33433**
Zip
24 **FL** Country
25 **Boyd** Zip
26 **33433** Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOYDEN, LAURANCE E JR
5747 A FOX HOLLOW DR
BOCA RATON FL 33486

81 Name **Laurence E. Boyden, Jr.**
82 Street Address (P.O. Box Number is Not Acceptable) **5946 Patio Dr.**
83 **Boca Raton, FL**
84 City **FL** 85 Zip Code **33433** 86 Country **Boyd**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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]* DATE **4/24/95**

12. OFFICERS AND DIRECTORS				13. OFFICERS AND DIRECTORS CHANGES			
1.1 TITLE	P/D/S	1.2 NAME	BOYDEN, LAURANCE E JR	1.1 TITLE	P/D/S	1.2 NAME	Boyd, Laurence E. Jr
1.3 ADDRESS	7500 MARTINIQUE BLVD	1.3 ADDRESS	BOCA RATON, FL 00000	1.3 ADDRESS	5946 Patio Drive	1.3 ADDRESS	Boca Raton, FL 33433
1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP	
2.1 TITLE	D/P/S	2.2 NAME	BOYDEN, LAURANCE E JR	2.1 TITLE		2.2 NAME	
2.3 ADDRESS	7500 MARTINIQUE BLVD	2.3 ADDRESS	BOCA RATON, FL 00000	2.3 ADDRESS		2.3 ADDRESS	
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	
3.1 TITLE		3.2 NAME		3.1 TITLE		3.2 NAME	
3.3 ADDRESS		3.3 ADDRESS		3.3 ADDRESS		3.3 ADDRESS	
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	
4.1 TITLE		4.2 NAME		4.1 TITLE		4.2 NAME	
4.3 ADDRESS		4.3 ADDRESS		4.3 ADDRESS		4.3 ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.2 NAME		5.1 TITLE		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS		5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.2 NAME		6.1 TITLE		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS		6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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. I further certify 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 or Chapter 617, Florida Statutes, and that my name appears in Block 12, Block 13, or on an attachment with an address.

SIGNATURE *[Signature]* DATE **2/17/93 4/24/95**
Print/Type Name of Signing Officer or Director **Laurence E. Boyden, Jr.** Title **President, Director, Secretary** Daytime Telephone Number **(407) 391-9429**