

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 # **F41309** (8)

1. Corporation Name

WESTERN FINANCIAL CAPITAL CORPORATION

Principal Place of Business

**4000 HOLLYWOOD BLVD.
SUITE 435-S
HOLLYWOOD FL 33021
US**

Mailing Address

**4000 HOLLYWOOD BLVD.
SUITE 435-S
HOLLYWOOD FL 33021
US**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1981

4. FEI Number

63-0785825

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**ROSEMORE, FREDRIC M
4000 HOLLYWOOD BLVD., STE 435 S
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name **CT Corporation System**
82 Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Rd.
83
84 City **Plantation** **FL** **85** Zip Code **33324**

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.

MICHAEL E. JONES

ASSISTANT SECRETARY

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

**NAME GREENBERG, MARTHA R.
STREET ADDRESS UNDERWOOD RD AT 43 N HWY
CITY-ST-ZIP RUSSELLVILLE AL**

TITLE **DVS** ☐ DELETE

**NAME ROSEMORE, LANCE B.
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021**

TITLE **D** ☐ DELETE

**NAME ROSEMORE, FREDERIC M.
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021**

TITLE **D** ☐ DELETE

**NAME HAMIL, THOMAS
STREET ADDRESS 123 E. 95TH STREET
CITY-ST-ZIP NEW YORK NY 10128**

TITLE **DP** ☐ DELETE

**NAME ROSEMORE, ANDREW
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021**

TITLE **D** ☐ DELETE

**NAME ROSEMORE, MARION
STREET ADDRESS 4000 HOLLYWOOD BLVD., STE. 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME **200002503422--2**

1.3 STREET ADDRESS **--04/28/98--01087--017**

1.4 CITY-ST-ZIP ******150.00 ****150.00**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE

CR2E034 (10/97)