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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

SIGNATURE:

F9400002220 (1)

1. Corporation Name

GOLDSMITH, AGIO, HELMS SECURITIES, INC.

Mailing Address Principal Place of Business 1170 THIRD ST. SOUTH #C201 1170 THIRD ST. SOUTH #C201 NAPLES FL 33940 NAPLES FL 33940 3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1994 02/07/1995 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 41-1658525 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zip Ζφ Country Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) GOLDSMITH, STEVEN M 1170 THIRD STREET SOUTH #C201 **R3** NAPLES FL 33940 85 Zip Code 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition DELETE 1. 1 TITLE TITLE CARUSO JR, GERALD M 1.2 NAME NAME 1ST BANK PLACE - 46TH FL, 601 2ND AVE. S. 1.3 STREET ADDRESS STREFT ADDRESS MINNEAPOLIS MN 14 CITY-ST-ZIP DITY - ST - 7IP Addition Change DELFTE 2 1 TITLE TITLE KIEFER, JAN M 22 NAME NAME 1ST BANK PLACE - 46TH FL, 601 2ND AVE. S. 2.3 STREET ADDRESS STREET ADDRESS MINNEAPOLIS MN 24 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE CEOD 3 1 TITLE THEE HELMS, JACK P 32 NAME NAME 1ST BANK PLACE - 46TH FL, 601 2ND AVE. S. 3.3 STREET ADDRESS STREET ADDRESS MINNEAPOLIS MN 3 4 CITY - ST - ZIP CITY - ST - ZIP Addition DELETE 4. 1 TITLE TITLE LYNNER, TERRY A 4.2 NAME NAME 1ST BANK PLACE - 46TH FL, 601 2ND AVE. S. 4.3 STREET ADDRESS STREET ADDRESS MINNEAPOLIS MN 4.4 CITY - \$1 - ZIP City-St-ZiP ☐ Change Addition | DELETE 5.1 TOLE TILE GOLDSMITH, STEVEN M 5.2 NAME NAME 1170 THIRD STREET SOUTH #C201 **5.3 STREET ADDRESS** STREET ADDRESS NAPLES FL 54 CITY-ST-ZIP CITY - ST - ZIP ☐ Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 C!TY - ST - ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cart; 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.

GERALD M. CALUSO, JR. 4.15.96 941-263-1199

(12/95)

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