## 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** 

## F9700000069 (1) DOCUMENT # 1. Corporation Name

SAN CLEMENTE SECURITIES, INC.

## **FILED** Jan 26 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailin	Mailing Address							
	RECODO. SUITE B		1031 CALLE RECODO. SUITE B							
SAN CLEMEN	TE CA 92673	SAN (	SAN CLEMENTE CA 92673			DO NOT	UDITE IN TURO	00405		
								VRITE IN THIS	SPAUE	
							<ol> <li>Date Incorporated or Qualter</li> <li>01/06/1997</li> </ol>	nea		
2 Principal P	lace of Business	2e Ma	2a, Mailing Address				4. FEI Number		172	Applied For
21	acco or posmedo	26					95-4165554		<del></del>	ot Applicable
Suite, Apt.	#. etc		Suite, Apt. #, etc.			20 4 100004			Additional	
22	.,	<b>⊢</b> ¬	27			<ol><li>Certificate of Status Desire</li></ol>	d 🔲	<b>+</b> - · · -	Required	
City & State	<del></del>		City & State			6. Election Campaign Finance	ina		May Be	
23		<del></del>	28				Trust Fund Contribution	""g []		to Fees
Zip	Country	<del> </del>			untry		8. This corporation owes or h	as paid the cur		
24	25	29	Ì	30			Personal Property Tax due			□ No
	g, Name and Address	of Current Registere	d Agent				10. Name and Address of Ne	w Registered	Agent	
ALLEN, CAROL					81	Name				
1004 N. WOODLAND, STE. 1			82 Street Add			Ctroot Ad	Ideans (D.O. Day Number is hist Ass			
DELAND FL 32720			62 Street			Street Ad	ldress (P.O. Box Number is Not Acc	eptable)		İ
	<b></b>				83					
					84	Ch.	· · · · · · · · · · · · · · · · · · ·		pr   7:-	Code
				-	B4	City		FL	<b>85</b>   Zip	Code
11. Pursuant	to the provisions of Section	ns 607.0502 and 607.1	508, Florida Statute	s, the at	oove-	named co	orporation submits this statement for ration's board of directors. I hereby	the purpose of	changing	its registered
agent. I a	m familiar with, and accep	t the obligations of, Se	ction 607.0505, Flo	ida Stat	ules.	ine corpor	ration's board of directors, thereby	accept the app	Olithinent a:	s registered
SIGNATURE	Signature, typed or profed name of	······	nov.				guired when reinstating)	DATe	·	<del>-</del>
12.		ICERS AND DIRECTO		13.	Agen	i s graiture rec	ADDITIONS/CHANGES TO		DIRECTO	RS IN 12
TITLE	PDS		DELETE	1.1 711	TI F		ADDITIONA/OTIANGES TO	SITTOLITO AITE	Change	Addition
NAME	CHRISTOPHER, COO	OKE B	-	1.2 NA						
STREET ADDRESS	1031 CALLE RECOD		1.3 STREET ADDRESS		DOBESS					
CITY-ST-ZIP	SAN CLEMENTE CA				TY-ST					
TITLE	DV		DELETE	2.1 Til					Change	Addition
NAME	SUNDERLAND, THO	MAS H	_	2.2 NA					_ '	_
STREET ADDRESS	1031 CALLE RECOD					DORESS				
CITY-ST-ZIP	SAN CLEMENTE CA				ITY-ST					
TITLE	1		DELETE	3 1 TII		- 211			Change	Addition
NAME	BANERJEE, DEBASK	¥H		3.2 NA					0-	
STREET ADDRESS	1031 CALLE RECOD					DDRESS				
CITY-ST-ZIP	SAN CLEMENTE CA		3.4 CITY-ST-ZIP							
TITLE	D		DELETE	4.1 111		-11	•	·-	Change	☐ Addition
NAME	SUNDERLAND, SANI	DRA	_	4. 2 N					_ 3	_
STREET ADDRESS	1031 CALLE RECODO, SUITE B			4.3 STREET AD		DOBESS				
CITY-ST-ZIP	SAN CLEMENTE CA 92673			4.4 CITY - ST - ZIP						
TITLE	DELETE			5.1 TITLE				☐ Change	☐ Addition	
NAME				5.2 NAME				•	ļ	
STREET ADDRESS						DDRESS				ļ
CITY-ST-ZIP					IY-ST	1				-
TITLE			DELETE	6 1 TH	•		• • •	<del> </del>	Change	Addition
NAME			<del></del>	62 NA					_ •	_
STREET ADDRESS						DDRESS				
CITY-ST-ZIP				6 3 STREET ADDRESS 6 4 CITY-ST-ZIP						
On indirent	_			040	11-91-	T11				j

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 of 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.

1/8/98