

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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G46342 (3)

1. Corporation Name
PBG FINANCIAL SERVICES, INC.



Principal Place of Business % DONALD R GRAHAM P.O. BOX 596 GRACEVILLE FL 32440	Mailing Address % DONALD R GRAHAM P.O. BOX 596 GRACEVILLE FL 32440
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Country 30

3. Date Incorporated or Qualified 06/14/1983		
4. FEI Number 59-2382703	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

GRAHAM, DONALD R
5306 BROWN ST
GRACEVILLE FL 32440

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAYMER, BRYAN W	1.2 NAME	
STREET ADDRESS	1188 10TH AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	GRACEVILLE FL 32440	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PELHAM, CLIFFORD	2.2 NAME	
STREET ADDRESS	1239 HWY 2	2.3 STREET ADDRESS	
CITY-ST-ZIP	GRACEVILLE FL 32440	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEPHENSON, CHARLES	3.2 NAME	
STREET ADDRESS	1717 HWY 2	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAMPBELLTON FL	3.4 CITY-ST-ZIP	
TITLE	DVC <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCRAE, FINLEY	4.2 NAME	
STREET ADDRESS	1605 8TH AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	GRACEVILLE FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIPS, CURTIS	5.2 NAME	
STREET ADDRESS	5028 HIGHWAY 77	5.3 STREET ADDRESS	
CITY-ST-ZIP	GRACEVILLE FL	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAMM, JOHN W.	6.2 NAME	
STREET ADDRESS	RT 3 BOX 206	6.3 STREET ADDRESS	
CITY-ST-ZIP	SLOCUMB AL	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: *Donald R. Graham* **REQUIRED** February 4, 1998 850-263-3267

CR2E034 (10/97)

DIRECTORS AND OFFICERS CONTINUED

PBG Financial Services, Inc.

Donald R. Graham, D/Pres./Chrm.
5368 Ezell Street
Graceville, Florida 32440

Joseph A. Sheffield D/Sec.
P.O. Box 28329
Panama City, Florida 32411-8329

Carol C. Smith, Treas.
1255 Sanders Avenue
Graceville, Fl. 32440