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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H89457

(6)

GENESIS FINANCIAL CORPORATION

THE COULT OF THE UP

Principal Place of Business

Mailing Address

TALE SCATCH DINE DO

FILED Feb 03 1997 8:00am Secretary of State



BRANDON F	33511	BRANDON PL 33511-8304			
,		• •		3. Date Incorporated or Qualified 12/04/1985	3e, Date of Last Report 07/17/1996
2. Principal P	Place of Business BAYSHURE BLVD.	2a. Mailing Address	1530	4. FEI Number	Applied For
21 20 ((Suite, Apt.		26 P.O. Box /	330	59-2646742	Not Applicable
22 #	403	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	PA, FL	28 BLANDON	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Žip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24 5562	9. Name and Address of Current	29 936 9 30	HILLS		Yes No
Ditio		ueðisteten Yðeut	81 Name	10. Name and Address of New Ra)
AND DOCTOR DIST OF					
BRANDON FL 33511				Address (P.O. Box Number is Not Acceptable 1	200
			83	H-111	700
			84 City	# 403	Total 75- Code
				TAMPA	FL 65 33624
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 appointment as registered agent.					
SIGNATURE / Kusso /-28-97					
12.	Signature, typed of profee mame of registered agent	and title I applicable (NOTE: R	<u> </u>	required when reinstating)	OATE
TITLE	OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	
NAME	RUSSO, RICHARD P., SR.	The Decree	1.2 NAME	PRESIDENT - TREAS. DIE RICHARD F. RUSSE 2611 BAYSHORE BLV TAMPA, FL 336	or and the state of the state o
STREET ADDRESS	4001 SADDLE RIDGE DR.		1.3 STREET ADDRESS	20 1 ROLLIGE REV	D, #163
CITY-ST-ZIP	VALRICO FL 33594		1.4 CITY - ST - ZIP	Trungs Fr 336	20
TITLE	DP .	DELETE	2.1 TITLE	1 1 1 1 2	Change Addition
NAME	RUSSO, RICHARD P	/ \	2.2 NAME		
STREET ADDRESS	223 LITHIA PINECREST RD.		2.3 STREET ADDRESS		
CITY-S1-ZIP	BRANDON FL 33511	,	2.4 CITY-S1-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	HOLSONBACK, JOHN P.	<i>Y</i>	3.2 NAME		
STREET ADDRESS	100 N. TAMPÁ ST., STE. 2650		3.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33602		3.4. CITY-ST-ZIP		
TITLE		☐ DEFELE	4.1 Tetle		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		İ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		L DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	·	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY-ST-ZIP		
l 14. I do heret	by certify that the information supplied v	with this filing does not qualify fo	or the exemption s	tated in Section 119 07/3Vi). 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 chapter as on application with an address.

SIGNATURE: