

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Morissey
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY - 1 AM 7:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J61124** (0)

1. Corporation Name
PUBLIC FINANCE CORP.

Principal Executive Officer
**3125 CRILL AVE.
PALATKA FL 32177-5349**

Mailing Address
**3125 CRILL AVE.
PALATKA FL 32177-5349**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Chartered **03/10/1987** 3a. Date of Last Report **04/26/1994**

4. FCI Number **59-2773201** 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**

7. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

21. Home State of Inc. or Mailing Address	22. Mailing Address
22. State Apt. # etc.	23. State Apt. # etc.
23. City & State	24. City & State
24. Zip	25. Country
25. Zip	26. Country

9. Name and Address of Current Registered Agent

**KRISER, RYAN J.
114 THICKET LANE
PALATKA FL 32077**

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 607.05(2) and 607.1508, Florida Statutes, the above named corporation submits the 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 607.05(5), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

12.1 NAME	PD KRISER, RYAN J. 114 THICKET LANE PALATKA FL
12.2 NAME	
12.3 NAME	
12.4 NAME	
12.5 NAME	
12.6 NAME	
12.7 NAME	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.4 NAME	
13.5 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME	
13.7 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8 NAME	

14. I, the undersigned, certify that the information appearing on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 131.02(2)(a), 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. I am an officer or director or registered agent of the corporation or trustee empowered to execute this report as required by Chapter 1307, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment, with an address.

SIGNATURE: *Ryan Kriser*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95 904 328-5000