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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	IUAL REP	ORT	Secretary of State					Sect	Secretary of State				
	<u> 1998</u>	V.	: Test	DIVISION OF CORPORATIONS				. Ott	ıı y v		rate		
	IMENT ion Name Y FINANC	# J6933 IAL MORTGAGE		(6)									
Principal Place of Business SGREGORY FRANKLIN				Mailing Address % GREGORY FRANKLIN					eo filio iu	EE CEUDI ONOIL C	ifoli eleli olu	II DIALI IANI	
5967 SE FEDERAL HWY			5967 SE FEDERAL HWY										
STUART FL	34997		STUART FL 34997					3. Date Incorporated or Qu		IN THIS SI	PACE		
. _ .								04/15/1987					
2. Principal Place of Business			├ ──	2a. Mailing Address				4. FEI Number 59-2806234				oplied For	
Suite, Apt. #, etc.				Suite, Apt. #, etc.								ot Applicable Additional	
22			27					Certificate of Status Des	ired			poulred	
City & Sta	ite		28 Ci	City & State				6. Election Campaign Fina	ncing	П		May Be	
Zip		Country	Z0 Z0	0	Cou	ntry		Trust Fund Contribution 8. This corporation owes o	r has na			to Fees	
25			29					Personal Property Tax d	ue June	30.	Yes [No	
CC		and Address of Curre	ent Registere	ed Agent		81	Name	10. Name and Address of	New Re	gistered A	gent		
FRANKLIN, GREGORY 5967 SE FEDERAL HWY							····			·			
STUART FL 34997						82	Street Add	dress (P.O. Box Number is Not A	cceptab	ile)			
•						83							
							City	······································			85 Zip	Code	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorize									e	<u>FL</u>	1 .		
office or	registered age	ent, or both, in the Stat h, and accept the obli	le of Florida.	Such change was	authorized	d by	the corpore	rporation submits this statement i ation's board of directors. I hereb	or tue b	urpose of contract the appoint	intment as	s registered registered	
SIGNATURE	enii (eniilli) cai yyll	is, and accept the obli	gations or, se	, cucu 1007.0303, 1	TUHUB SIBIL	utes	*						
	Signature, typed	or printed name of registered a				Ager	it signature requ	uired when reinstating)		DATE			
12.	PDST	OFFICERS AI	ND DIRECTO	DELETE	13. 1.1 Til	T.F.		ADDITIONS/CHANGES TO) OFFIC	ERS AND D	DIRECTOR ☐ Change	S IN 12	
NAME	1	n, gregory			1.2 NA							L Addition	
STREET ADDRESS	ESS 2168 HARRISON ST.						ADDRESS						
CITY-ST-ZIP	STUART	FL 34997			1.4 CII	Y-\$1	-ZIP						
TITLE				☐ DELETE	2.1 TIT					L	i Change	Addition	
NAME STREET ADDRESS					22 NA		ADDOCCC						
CITY-ST-ZIP					2.4 CI		ADDRESS r-71P						
TITLE				DELETE	3.1 TIT		E.11		-	I	Change	Addition	
NAME					3.2 NA	ME							
STREET ADDRESS					3.3 STF	REET A	Address						
CITY-ST-ZIP TITLE	 			DELETE	3.4. CI		í-ZIP	······································		<u>-</u>	Change	Addition	
NAME				C otter	4. 2 NA					L-	T currings	L.J. AUXIIION	
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP			-		4.4 CIT	Y-\$T	- ZIP						
TITLE				DELETE	5.1 TITI						Change	Addition	
NAME CIDEET ADODESC	[5.2 NA		- Danies						
STREET ADDRESS CITY-ST-ZIP							ADDRESS						
TITLE				DELETE	5.4 CIT 6.1 TIT		-215				Change	Addition	
NAME					6.2 NA	ME					-		
STREET ADDRESS					6.3 STF	EET A	DORESS						
CITY-ST-ZIP	<u> </u>				6.4 CIT	Y-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 suppliemental 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.

FILED

Feb 27 1998 8:00am