

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JAN 23 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J77973 (2)

1. Corporation Name
PALM COAST FINANCIAL CORPORATION

Principal Place of Business Mailing Address
**9100 GRIFFIN ROAD 9100 GRIFFIN ROAD
COOPER CITY FL 33328 COOPER CITY FL 33328**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/12/1987** 3a. Date of Last Report **03/30/1994**
4. FEI Number **59-2820198** 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **1489 W. Palmetto Park Rd.** 26 **1489 W. Palmetto Park Rd.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **300** 27 **300**
City & State City & State
23 **Boca Raton, FL** 28 **Boca Raton, FL**
Zip Country Zip Country
24 **33486** 25 **Palm Beach** 29 **33486** 30 **Palm Bch**

9. Name and Address of Current Registered Agent
**ZEDECK, LEONARD E.
1820 N.E. 163RD STREET
SUITE 101
NORTH MIAMI BEACH FL 33162**

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 of Board or authorized officer and title if applicable) (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRISWOLD, CARL F.	1.2 NAME	GRISWOLD, CARL F.
STREET ADDRESS	9100 GRIFFIN ROAD	1.3 STREET ADDRESS	1489 W. Palmetto Park Rd., #300
CITY-ST-ZIP	COOPER CITY FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33486
TITLE	D	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, STANLEY S.	2.2 NAME	LANE, STANLEY S.
STREET ADDRESS	9100 GRIFFIN ROAD	2.3 STREET ADDRESS	1489 W. Palmetto Park Rd., #300
CITY-ST-ZIP	COOPER CITY FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33486
TITLE	DST	3.1 TITLE	DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZEDECK, MURRAY	3.2 NAME	ZEDECK, MURRAY
STREET ADDRESS	9100 GRIFFIN ROAD	3.3 STREET ADDRESS	1489 W. Palmetto Park Rd., #300
CITY-ST-ZIP	COOPER CITY FL	3.4 CITY-ST-ZIP	Boca Raton, FL 33486
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or biennial 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 its predecessor or trustee and authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attached sheet with an addition.

SIGNATURE: *Carl F. Griswold* **CARL F. GRISWOLD** 1/17/95 407-347-2031
(Signature and typed or printed name of holding officer or director)