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FILED

May 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # K22814 (3)

1. Corporation Name  
MIDLAND SECURITIES CORPORATION

Principal Place of Business  
% ROBERT J. BANKS  
601 CLEVELAND ST., SUITE 930  
CLEARWATER FL 34615

Mailing Address  
% ROBERT J. BANKS  
601 CLEVELAND ST., SUITE 930  
CLEARWATER FL 34615-4170



2. Principal Place of Business  
21 33 North Garden Avenue

Suite, Apt. #, etc.  
22 Suite 1200

City & State  
23 Clearwater, FL

Zip Country  
24 34615 25

2a. Mailing Address  
26 33 North Garden Avenue

Suite, Apt. #, etc.  
27 Suite 1200

City & State  
28 Clearwater, FL

Zip Country  
29 34615 30

3. Date Incorporated or Qualified  
05/06/1988

3a. Date of Last Report  
04/29/1996

4. FEI Number  
59-2892495

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

9. Name and Address of Current Registered Agent

BANKS, ROBERT J.  
601 CLEVELAND ST  
SUITE 930  
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

81 Name  
Banks, Robert J.  
82 Street Address (P.O. Box Number is Not Acceptable)  
33 North Garden Avenue, Suite 1200  
83  
84 City  
Clearwater FL 85 Zip Code  
34615

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME BANKS, ROBERT J.  
STREET ADDRESS 601 CLEVELAND ST. #930  
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

TITLE ST  
NAME GLOECKL, KEITH J.  
STREET ADDRESS 601 CLEVELAND ST. #930  
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS 33 North Garden Avenue, Suite 1200  
14 CITY-ST-ZIP Clearwater, FL 34615

21 TITLE ☒ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS 33 North Garden Avenue, Suite 1200  
24 CITY-ST-ZIP Clearwater, FL 34615

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do 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

Robert J. Banks

04-24-97

(813) 461-4801

CR2E034 (9/96)