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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

Mailing Address

% ROBERT J. BANKS
33 N GARDEN AVE. SUITE 1200
CLEARWATER FL 34615
US

% ROBERT J. BANKS
33 N GARDEN AVE. SUITE 1200
CLEARWATER FL 34615
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/06/1988

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 33 North Garden Ave.

Suite, Apt. #, etc.

22 Suite 1200

City & State

23 Clearwater FL

Zip

24 33755

Country

25

2a. Mailing Address

26 33 North Garden Ave.

Suite, Apt. #, etc.

27 Suite 1200

City & State

28 Clearwater FL

Zip

29 33755

Country

30

9. Name and Address of Current Registered Agent

BANKS, ROBERT J.
33 N GARDEN AVENUE
SUITE 1200
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 Ave.

83

Suite 1200

84 City

Clearwater FL

FL

85 Zip Code

33755

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 ☐ DELETE

NAME DP
BANKS, ROBERT J.
STREET ADDRESS 33 N GARDEN AVE, SUITE 1200
CITY-ST-ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME ST
GLOECKL, KEITH J.
STREET ADDRESS 33 N GARDEN AVE, SUITE 1200
CITY-ST-ZIP CLEARWATER FL

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

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 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

Keith J. Gloeckl

Keith J. Gloeckl 04-01-98 (813) 461-4801

CR2E034 (10/97)