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

PROFIT CORPORATION ANNUAL REPORT



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

1996

1. Corporation Name	
TOBY WHITE FINANCIAL GROUP, INC.	
TODE WHILE FRANCIAL GROOT, INC.	A HABITATU ANI BOTOR ATTUR TOTOR TIAN BUTO BUTO BUTO BUTO BUTO BUTO BUTO BUTO
Principal Place of Business Mailing Address	
4326 TRADEWINDS AVENUE EAST LAUDERDALE BY THE SEA FL 33308 LAUDERDALE BY THE SEA FL 33308	
ENOUGHDALE OF THE GENTE GOOD	De Date has a section of Conference Conferen
	3. Date Incorporated or Qualified 07/28/1989 3a. Date of Last Report 06/20/1995
Principal Place of Business     2a. Mailing Address	4. FEI Number Applied For
21 26	<b>65-0143646</b> Not Applicable
Suite, Apt. #, etc.	5. Certificate of Status Desired \$8.75 Additional
22 27	Fee Required
City & State City & State 28	6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution  St.00 May Be Added to Fees
Zip Country Zip Country	8. This corporation has liability for intangible tax under s 199.032,
24 25 29 30	Florida Statutes
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
81 Name	
WHITE, CHARLES 264 IMPERIAL LN 82 Street A	Address (P.O. Box Number is Not Acceptable)
LAUDERDALE BY THE SEA FL 33308	
EXODERIDADE DI TITE GENT E GOOGG	
<b>84</b> City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named cor	progration submits this statement for the numose of changing its registered office
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's L familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	poard or directors. I hereby accept the appointment as registered agent. I am
SIGNATURE	
Signature typod or printed name of registored agent and their application (XOT) Registered Agent is great in re-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THE PD DELETE 11THE	Change Addition
NAM: WHITE, CHARLES N 12 NAME	
STREET ADDRESS 264 IMPERIAL LN 13 STREET ADDRESS	
CITY-ST-ZIF LAUDERDALE BY THE SEA FL 33308 14 CITY-ST-ZIP	
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NAME WHITE, CAROLINE STREET ADDRESS 264 IMPERIAL LN 23 STREET ADDRESS	
STREET ADDRESS 284 IMPERIAL LN 2.3 STREET ADDRESS CITY-ST-ZIP LAUDERDALE BY THE SEA FL. 33308 2.4 CITY-ST-ZIP 2.4 CITY-ST-ZIP	
TILLE DELETE 3 1 TILLE	Change Addition
NAME 32 NAME	
STREET ADDRESS 3.3. STREET ADDRESS :	
CITY-S1-ZIP 34 CITY-S1-ZIP	
THILE DELETE 4 11 TLE	☐ Change ☐ Addition
NAME 4.2 NAME	
STREET ADDRESS 43 STREET ADDRESS	
CITY-ST-ZIP	Change Addition
NAME 52 NAME	[] olarida
STREET ADDRESS . 53 STREET ADDRESS	
CITY-ST-ZIP 54 CITY-ST-ZIP	
TITLE DELETE 6 1 TITLE	☐ Change ☐ Addition
NAME 62 NAME	
STHEET ADDRESS 63 STREET ADDRESS	
CHY-ST-ZIP 6.4 CHY-S1-ZIP 6.4 CHY-S1-ZIP 6.4 CHY-S1-ZIP 7.14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the control of the con	lify for the exemption stated in Section 119 07(3)(k). Florida Statutes. Lituther

coming 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 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESCRIPTION

7.22-96 98 Y-**93**8-5199 Daytonic Provide #