PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

L46820

(1)

FINANCIAL SERVICES MARKETING DISTRIBUTORS, INC.  Principal Place of Business Mailing Address					
950 RAILROAD AVE WINTER PARK FL 32789 US		P.O. BOX 1420 Winter Park FL 32790 US			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				<b>02/01/1990 4.</b> FEI Number	03/16/1995
Principal Place of Business     1		2a. Mailing Address	A A		Applied For  Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		Gily & State 28 WINTER F	ARK FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	<del> </del>
24	25	[29] 37799 [3	o US	Florida Statutes  Yes	
	9. Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
ACHOPIED JOHN II					
SCHOFIELD, JOHN, K  82 Street Address (B.O. Box Number is Not Acceptable)  950 N ORLAND AVE					) <b>E</b>
	R PARK FL 32789		83		
			84 City		85 Zip Code
	7.6				FL   ' ' '
or registere	o the provisions of Sections 607.0502 id agent, or both, in the State of Flori n, and accept the obligations of, Sect	da. Such change was authorized t	he above-named corpora by the corporation's board	tion submits this statement for the pury of directors. I hereby accept the appo	aose of changing its registered office introduced agent. I am
SIGNATURE: _	lignature, typed or printed name of registered agen	Land block executions (NOTE E	tagistered Agent signature required	nhoo gainthat and	[JATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	D	☐ DELETE	1. 1 TITLE		Change Addition
NAME	SCHOFIELD, JOHN K.		1.2 NAME		
STREET ADDRESS	950 RAILROAD AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	ET OFFET	1.4 CITY-ST-ZIP		
TITLE NAME	ST HILL, PEGGY J.	☐ DELFTE	2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	950 RAILROAD AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP		P Dr. Fre	3 4 C/TY - ST - Z/P		Party on Party
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME PAREST ADDRESS			4.2 NAME		
STREET ADDRESS CITY-ST-7/P			4.3 STREET ADDRESS		
TITLE		□ DELETÉ	4.4 CITY-ST-ZIP 5. 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREFT ADDRESS		
CITY-ST-7:P			5.4 CITY-ST-ZIP		
TITLE		□] DELETÉ	6. 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SI-7/P	codify that the information	with the films is astronomic formists	6 4 CITY-ST-ZIP	the exemption stated in Destina 440.6	27/20/de Florida Chabitata 14 idla
certify that appears in	certify that the information supplied the information indicates on this crim am an office, or director of the corpo Block 12 or Block 3 if changest or	waar ans ming is voluntarily rumishe wal report or supplemental annual i pration or the receiver or trustee en en a Dittachment with an address	report is true and accurate report is true and accurate repowered to execute this	r the exemption stated in Section 119.0 e and that my signature shall have the report as required by Chapter 607, Flo	or (a)(a), Florida Statutes, Fluriner same legal effect as if made under orida Statutes; and that my name

SIGNATURE:

PEGGY J. HILL 4.29.96

DELO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-628-0802

CR2E034 (12/95)