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Feb 05 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 # M88498 (4)

1. Corporation Name:  
ASSET MANAGEMENT RESEARCH CORP.

Principal Place of Business  
4440 NORTH OCEANSHORE BLVD  
SUITE 106  
PALM COAST, FL 32137  
US

Mailing Address  
PO BOX 352016  
PALM COAST FL 32135-2016  
US

3. Date Incorporated or Qualified 07/06/1988  
3a. Date of Last Report 02/23/1996

4. FEI Number 59-2909746  
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  
21 2855 Stone Avenue

2a. Mailing Address  
26 2855 Stone Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
23 Deland, FL

City & State  
28 Deland, FL

Zip 24 32720

Country 25 USA

Zip 29 32720

Country 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARDING, SEYMOUR L.  
4440 N. OCEANSHORE BLVD., SUITE 106  
PALM COAST FL 32137

81 Name  
Harding, Seymour L.

82 Street Address (P.O. Box Number is Not Acceptable)  
2855 Stone Avenue

83

84 City Deland FL 85 Zip Code 32720

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 type for printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD  
NAME HARDING, SEYMOUR L.  
STREET ADDRESS 4440 N. OCEANSHORE BLVD., SUITE 106  
CITY-ST-ZIP PALM COAST FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 2855 Stone Avenue  
1.4 CITY-ST-ZIP Deland, FL 32720

TITLE VSD  
NAME HARDING, JEFFREY A.  
STREET ADDRESS 4440 N. OCEANSHORE BLVD., SUITE 106  
CITY-ST-ZIP PALM COAST FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS RFD 1, Box 321N  
2.4 CITY-ST-ZIP Ashland, NH 03217

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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:

Jeffrey A. Harding  
President

1/29/97 (603) 279-4783

Date

Daytime Phone #

CR2E034 (9/96)