FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N FOR FINANCIAL PLANNING, INC.									
Principal Place	e of Business	Mailing Address				1 (Dalling) and track attit 188:1 at);;;; 0404 \$104 1 3 11) 	Eldii Albii inal
%JULIA A. LEN 7845 QUAIL HO WESLEY CHAPE		%JULIA A. LENTZ 7845 OUAIL HOLLOW BLV WESLEY CHAPEL FL 3354 US				Date Incorporated or Qualifie 05/31/1988 FEI Number	ed .		Applied For
						59-1792226		N	lot Applicable
	ace of Business	2a. Mailing Address				5. Certificate of Status Desired			Additional
21 Christ Suite, Apt.	ine Brown	Suite, Apt. #, etc.							Required
	k 21491	27				 Election Campaign Financing Trust Fund Contribution 			May Be to Fees
City & State	9	City & State	•	,		7. Is this nonprofit corporation			on?
23 Tampa	Florida	28	1 0					No No	
Zip 24 33622-	Country	Zip	-	intry		This corporation owes or has Personal Property Tax due Ju			ntangible No
24 33022	-1491 25 Hillsboroug	Negletered Agent	30	Τ		10. Name and Address of New			Vone Duo
	J. Hallo and Addies of Control	Trogistored regula		61	Name				TONE PAY
TORBI A	NAURO I				<u>Jodí P</u>	erez			
TOBIN, DAVID J						ddress (P.O. Box Number is Not Acceptable) N. Rocky Point Drive. 7th Floor			
700 CENTRAL AVE ST PETERSBURG FL 33701				83	<u> </u>	1 Mocky Toline Dilve	9_/	1001	
0,,,,,,				84 ,	City Lampa		FL	85 Zip	Code 3607
11 Durayant	to the provisions of Sections 617 0502	and 617 1508 Florida Statu	tes the a	POVE-I	nampa cor	poration submits this statement for th	ne purpose o	t changing	its registered
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State on I familiar with, and accept the obligat	of Florida, Such change was	authorize	d by ti	he corpora	tion's board of directors. I hereby ac	cept the app	xointment a	s registered
1	m familiar with, and accept the obligat	ions of, Section 617,0503, Fi	iorida Stai	tutes.		4	15/10		
SIGNATURE :	Signature, typed or printed name of registered agent	and title if applicable (NO	TF: Registers	d Agent	signatura regul	Ired when reinstating)	DATE		
12.	OFFICERS AND		13.	d Algorit	anginera o requi	ADDITIONS/CHANGES TO OF		DIRECTO	RS IN 12
TITLE	P	DELETE	1.1 TI	TLE	P			XX Change	
NAME	NESS. DAVID		1.2 N	AME	1 ~	ohin Bossii I			
STREET ADDRESS	880 CARILLON PKWY		1.3 5	TREET AL	DDRESS 7	obin, David J.			
CITY-ST-ZW	ST PETERSBURG FL		1.4 0	ITY-ST-	ZIP Ś	00 Central Ave. t. Petersburg, FL			
TITLE	VT	DELETE		2.1 TITLE T			,	X Change	
NAME	TOBIN, DAVID J.		2.2 N	2.2 NAME JC		odi Perez 701 N. Rocky Point I			
STREET ADDRESS	700 CENTRAL AVE.		2.3 \$	TREET AL			rive,	7th Fl	oor
CITY-ST-ZIP	ST PETERSBURG FL		2.40	HTY-ST-	_{-ZIP} ∣Ta	mpa, FL			
TITLE	C	DELETE	3.1 TITLE		c			Change	Addition
NAME	SNYDER, GINGER R		3.2 N	AME		es, David			
STREET ADDRESS	5010 W. KENNEDY BLVD.		3.3 \$	TREET AC	DDRESS 1	Carillon Pkwy			
CITY-ST-ZIP	TAMPA FL		3.4.0	-T2 - YTK	-ZIP ST	Petersburg, FL			
TITLE	Ď	X DELETE 4.1		1 TITLE D				X Change	Addition
NAME	arntzen, allen d		4.26	IAME	Zm	mistowski, Michael J. 555 Central Avenue, Suite B t. Petersburg, FL			
STREET ADDRESS	2240 WILLOWBROOK DR		4.3 \$	TREET AL				•	İ
CITY-ST-ZIP_	CLEARWATER FL		4.4 0	ITY-ST-	ZIP 3 C	. Petersburg, FL			
TITLE	D	☐ DELETE	5.1 TI	TLE				Change	☐ Addition
NAME	BAKER, CARLOS F.		5.2 N	ame					
STREET ADDRESS	736 SIXTH ST, W		5.3 ST	TREET AC	DORESS				
CITY-ST-ZIP	TIERRA VERDE FL			ITY-ST-	ZIP				
TITLE	D	DELETE	6.1 TI	TLE				Change	Addition
NAME	ATHANASSIE, STEVE		6.2 N	AME					
STREET ADDRESS	5328 TROUBLE CREEK RD		6.3 S	TREET AC	DDRESS				

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1-13-98

813-299-7223

FILED

Feb 12 1998 8:00am

Secretary of State