FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

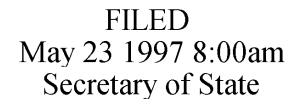
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ADVANCED FINANCIAL PLANNING SECURITIES CORPORATI ON

Mailing Address





5038 THOROUGHBRED LANE SCISE THOROUGHBRED LANE	
BRENTWOOD TN 37027 BRENTWOOD TN 37027-4225	
	3. Date Incorporated or Qualified
2. Principa Place of Business 2a. Mailing Address	4. FEI Number Applied For
26	62-1257633 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	5. Certificate of Status Desired S8.75 Additional Fee Required
City & State City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	8. This corporation has liability for intangible tax under s. 199.032,
25 29 30	Florida Statutes
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 81 Name	
	Address (P.O. Box Number is Not Acceptable)
83 83 83 83 83 83 83 83 83 83 83 83 83 8	
84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named office or registered agent, or both, in the State of Florida. Such change was authorized by the conagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE.	
Signature, typed or profess rame of registered agent and title 1 applicable. (NOTE: Registered Agent signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS 13.	Change Addition
TIETHOON, MAN C. M.	
TOTAL CAPITAL	
COLY ST NASHVILE TN 1.4 CITY-ST-ZIP THE ST DELETE 2.1 TITLE	Change Addition
NAME PARKSINSON, JOANNE 2.2 NAME 2.3 STREET ADDRESS 5038 THOROUGHBRED LANE 2.3 STREET ADDRESS	
CHY-SI 7PP BRENTWOOD IN 2.4 CHY-SI-ZIP THLE D DELETE 3.1 THLE	Change Addition
NAM: PARKER, THOMAS J. 32 NAME	•
STREET ADDRESS 1159 GATEWAY LANE 33 STREET ADDRESS	
CITY-S-77P NASHVILLE TN 34.CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ALDRESS 4.3 STREET ADDRESS	
CHY-SI-7/P 4.4 CHY-SI-7/P	
THE DELETE 5.1 TITLE	Change Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 54 CITY-ST-ZIP	
TABLE COLLETE 61 TITLE	Change Addition
NAME 6.2 NAME	
STREET ADDRESS 63 STREET ADDRESS	
CBY-ST-ZP 64 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Bloc

SIGNATURE