**PROFIT**  ■ CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CGRPORATIONS

**DOCUMENT #** 

P9300026649

Mid Florida Financial Group, Inc

**FILED** Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90024 017 \*\*\*150.00 09-16-1999 90014 035 \*\*\*400.00



≣

≣

=

1501 Gulf Drive North Principal Place of Business 1501 Gulf Drive North Bradenton Beach, FL DO NOT WRITE IN THIS SPACE Bradenton Beach, FL 34217 3. Date Incorporated or Qualifed 04-09-1993 2a. Malling Address Applied For 2. Principal Place of Business 65-0406087 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 23 8. This corporation owes the current year intangible □No ☐ Yes 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Valente, James R Street Address (P.O. Box Number is Not Acceptable) 1501 Gull Drive North 83 Bradenton Beach, Fr 34217 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: R | egistered Agent signature requir |   |
|----------------|--|----------------------------------|---|
| 12.            | OFFICERS AND DIRECTORS   | 13.                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE          | O DELETE   | 1.1 TTLE                         | Change Addition                                   |
| NAME           | Robinson, Randy  | 12 NAME                          |   |
| STREET ADDRESS |  | 1,3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | Bradenton Beach FL 34217   | 1.4 CITY-ST-ZIP                  |   |
| TILE           | OELETE   | 2.1 TITLE                        | ☐ Change ☐ Additio                                |
| NAME           | Valence James R  | 22 NAME                          |   |
| STREET ADDRESS | Valente, James R<br>1501 Gulf Drive North  | 2.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | Bradenton Beach, FL 34217  | 2.4 CITY-ST-ZIP                  |   |
| TITLE          | [⟨⟨/T □ DELETE   | 3.1 TITLE                        | Change Addition                                   |
| NAME           | Gloria A. Miller<br>1561 Gulf Drive North  | 32 NAME                          |   |
| STREET ADDRESS | 1501 Gulf Drive North  | 3.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | inradenton iseach, FO OTAIT  | 3.A. CITY-ST-ZIP                 |   |
| TITLE          | ☐ OELETE   | 4.1 TILE                         | Change Addition                                   |
| NAME           |  | 4.2 NAME                         | •   |
| STREET ADDRESS |  | 4.3 STREET ADDRESS               | •   |
| CITY-ST-ZE     |  | 4.4 CITY-ST-ZIP                  |   |
| ₹∏LE           | ☐ DELETÉ   | 5.1 TITLE                        | ☐ Change ☐ Addition                               |
| NAME           |  | 5.2 NAME                         |   |
| STREET ADDRESS | ·  | 5.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    |  | 5.4 CITY-ST-ZIP                  |   |
| mie            | ☐ DELETE   | 6.1 TITLE                        | ☐ Change ☐ Addition                               |
| NAME           |  | 62 NAME                          |   |
| STREET ADDRESS |  | 63 STREET ADDRESS                |   |
| CITY-ST-ZIP    |  | 8.4 CTTY-ST-ZIP                  |   |

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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**