

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -4 AM 11: 57

DOCUMENT # P93000034677 (3)

1. Corporation Name

AYCO FINANCE CORPORATION

Principal Place of Business

505 MAITLAND AVENUE
ALTAMONTE SPRINGS FL 32701

Mailing Address

505 MAITLAND AVENUE
ALTAMONTE SPRINGS FL 32701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/13/1993

3a. Date of Last Report

01/13/1994

4. FEI Number

59-3210047

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

2a. Mailing Address

21 1250 So. Lakemonte Av.

26 P.O. Box 4549

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 WINTER PARK, FL.

28 WINTER PARK FL.

Zip

Country

Zip

Country

24 32792

25

29 32793

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AYCOCK, DAVID H
505 MAITLAND AVENUE
ALTAMONTE SPRINGS FL 32701

81 Name

SAME

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

1550 So. Lakemonte Ave

83

84 City

WINTER PARK

FL

85 Zip Code

32792

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: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

D
AYCOCK, DAVID H
647 CARVELL DR.
WINTER PARK FL

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 (checked), or both, attached with an address.

SIGNATURE:

SIGNATURES ARE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID H. AYCOCK

3/31/95 (407) 629-5588