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FILED  
May 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000056704 (8)

1. Corporation Name

JEFF AND KELLY'S FAMILY FINANCE, INC.

Principal Place of Business

701 S. FRENCH AVENUE  
SANFORD FL 32771

Mailing Address

701 S. FRENCH AVENUE  
SANFORD FL 32771-2578

2. Principal Place of Business

21 174 U.S. Hwy 1792

Suite, Apt. #, etc.

22 City & State

23 DEBARY FL

24 Zip

32713

Country

2a. Mailing Address

26 174 US Hwy 1792

Suite, Apt. #, etc.

27 City & State

28 DEBARY FL

29 Zip

32713

Country

9. Name and Address of Current Registered Agent

KELLEY, KYLE H

101 WYMORE RD.

SUITE 528

ALTAMONTE SPRINGS FL 32714

3. Date Incorporated or Qualified

08/15/1993

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3027824

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

10. Name and Address of New Registered Agent

81 Name

BALL JEFF

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

174 U.S. Hwy 1792

83

84 City

DEBARY

FL

85 Zip Code

32713

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 reinstating)

DATE

4/1/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

PTD  
NAME BALL, KELLY  
STREET ADDRESS 480 STONE ISL RD  
CITY-ST-ZIP ENTERPRISE FL

TITLE ☐ DELETE

VSD  
NAME BALL, JEFF  
STREET ADDRESS 480 STONE ISL RD  
CITY-ST-ZIP ENTERPRISE FL

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 as an attachment with an address.

SIGNATURE:

Signature of registered agent

4/1/97

CR2E034 (9/96)