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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000057548 (8) TLG FINANCIAL SERVICES CORP. Principal Place of Business Mailing Address 3125 NAUTILUS RD 3125 NAUTILUS RD MIDDLEBURG FL 32068-6608 MIDDLEBURG FL 32068-6808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/12/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-3202608 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country ZID Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 25 29 Personal Property Tax due June 30. 30 24 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEIDHOLT, DEANE E 3125 NAUTILUS RD Street Address (P.O. Box Number is Not Acceptable) MIDDLEBURG FL 32068-6608 83 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 prefert name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE LEIDHOLT, DEANE E 1.2 NAME 3125 NAUTILUS RD STREET ADDRESS 1.3 STREET ADDRESS MIDDLEBURG FL 32068-6606 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-ST-ZIP 3.4. CITY-ST-ZIP

64 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 on or an attachment with an aridress.

4.1 TITLE

4. 2 NAME

5.1 TITL€ 5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 City-St-ZiP

SIGNATURE:

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

DELETE

DELETE

DELETE

4/0/28 (904) 261-8819

Change

Change

Change

Addition

Addition

Addition

**FILED** 

May 01 1998 8:00am

Secretary of State