

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000081232 (9)

1. Corporation Name

HEARTLAND MONEY MANAGEMENT OF FLORIDA, INC.



Principal Place of Business

677 N. WASHINGTON BLVD., SUITE 17
SARASOTA FL 34236

Mailing Address

8060 KNUE ROAD, #232
INDIANAPOLIS IN 46250

2. Principal Place of Business

21 2055 Wood ST.

Suite, Apt. #, etc.

22 STE. 120

City & State

23 SARASOTA, FL

Zip

24 34237

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

SHASTEEN, PHILIP M
100 NORTH TAMPA ST.
SUITE 1800
TAMPA FL 33602

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

11/24/1993

3a. Date of Last Report

02/03/1995

4. FEI Number

65-0523691

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

SIGNATURE

Signature typed or printed name of registered agent and the filer, with

(NOTE: Registered Agent Signature is required for all filings)

DATE:

12. OFFICERS AND DIRECTORS

TITLE

D
NAME: PAYNE, KENNETH R
STREET ADDRESS: 8060 KNUE RD., #232
CITY-ST-ZIP: INDIANAPOLIS IN 46250

☐ DELETE

TITLE

D
NAME: DANKER, DANIEL G
STREET ADDRESS: 8060 KNUE RD., #232
CITY-ST-ZIP: INDIANAPOLIS IN 46250

☐ DELETE

TITLE

NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE

NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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TITLE

NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

TITLE

NAME:
STREET ADDRESS:
CITY-ST-ZIP:

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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 119.07(3)(g), 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.

SIGNATURE:

Kenneth R. Payne
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth R. PAYNE

3/27/94

317-577-4730

CR2E034 (12/95)