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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000006466 (4)

1. Corporation Name

DE MORGAN CAPITAL CORPORATION



Principal Place of Business

6421 CONGRESS AVE
SUITE 112
BOCA RATON FL 33487

Mailing Address

6421 CONGRESS AVE
SUITE 112
BOCA RATON FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/1994

2. Principal Place of Business

21 174 Comstock Ave

Suite, Apt. #, etc.

22 SE-217

City & State

23 Winter Park, FL

Zip

24 32789

Country

25 USA

2a. Mailing Address

26 1734 Northgate Blvd

Suite, Apt. #, etc.

27

City & State

28 Sarasota, FL

Zip

29 34234

Country

30 USA

4. FEI Number

65-0461133

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BARWICK, ROBERT D
6421 CONGRESS AVE
112
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name

Barwick, Robert D.

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

1734 Northgate Blvd.

83

84 City

Sarasota

FL

85 Zip Code

34234

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

4/27/98

12. OFFICERS AND DIRECTORS

TITLE CVPS ☐ DELETE

NAME BARWICK, ROBERT D
STREET ADDRESS 6421 CONGRESS AVE, STE 112
CITY-ST-ZIP BOCA RATON FL

TITLE P ☐ DELETE

NAME CARTER, WILLIAM
STREET ADDRESS 6421 CONGRESS AVE STE 112
CITY-ST-ZIP BOCA RATON FL

TITLE T ☐ DELETE

NAME WILLS, TRACY M
STREET ADDRESS 6421 CONGRESS AVE STE 112
CITY-ST-ZIP BOCA RATON F

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CVPS ☒ Change ☐ Addition

1.2 NAME BARWICK, Robert D
1.3 STREET ADDRESS 1734 Northgate Blvd
1.4 CITY-ST-ZIP Sarasota, FL 34234

2.1 TITLE P ☒ Change ☐ Addition

2.2 NAME CARTER William
2.3 STREET ADDRESS 1734 Northgate Blvd
2.4 CITY-ST-ZIP Sarasota, FL 34234

3.1 TITLE T ☒ Change ☐ Addition

3.2 NAME Wills, Tracy M
3.3 STREET ADDRESS 1734 Northgate Blvd.
3.4 CITY-ST-ZIP Sarasota, FL 34234

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 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.

SIGNATURE:

Tracy M Wills

April 26, 1998 (941)351-7887

CR2E034 (10/97)