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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400023281 (6)

## HOMETRUST HOLDING CORPORATION

Principal Place of Business Mailing Address 6112 WASHINGTON STREET 6112 WASHINGTON STREET HOLLYWOOD FL 33023 HOLLYWOOD FL 33023-1369 3. Date Incorporated or Qualified 3a. Date of Last Report 03/23/1994 04/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0495293 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zιρ Country Ζıρ This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LARRY BECKFORD **6122 WASHINGTON STREET** 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33023 83 City 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 printed name of registered agent and title if applicable (NOTE Registered Agent aignature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 96/6) 13. PĎ DELETE Change Addition TITLE 1 1 TITLE BECKFORD, LARRY 1.2 NAME CR2E034 NAME 10215 CARACAS ST STREET ADDRESS 1.3 STREET ADDRESS COOPER CITY FL 33026 1.4 CITY - ST - ZIP CITY-51-20 DELETE Addition TITLE 2.1 TITLE Change KING, RANDOLPH 2.2 NAME 3517 SW 16 CT STREET ADDRESS 2.3 STREET ADDRESS LAUDERDALE FL 33312 2 4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition 3 1 TITLE THILE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4 CITY-ST-ZIP CITY-ST-71F DELETE 41 TITLE Channe Addition THLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - 51 - 21F DELETE Change Addition TITLE 51 WILE 5.2 NAME NAM-

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

on supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the report or supplement annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that poration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name shanger or or an attachment with an address.

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

14. I do hereby certify that the information indicated on this art in I am an officer or director of the cappears in Block 12 or Block 3.0

STREET ADDRESS

STREET ADDRESS

City - St - ZiP

DITY-ST-ZP

THE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

DELETE

Date 954-964-1004

Change

Addition

**FILED** 

Apr 21 1997 8:00am

Secretary of State