

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

CORPORATION
ANNUAL REPORT
1995



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

RECEIVED
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DOCUMENT # P94000043895 (9)

1. Corporation Name

CONSOLIDATED LENDING, INC.

Principal Place of Business

4016 BARRANCAS AVENUE
PENSACOLA FL 32507

Mailing Address

4016 BARRANCAS AVENUE
PENSACOLA FL 32507

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/07/1994

3a. Date of Last Report

2. Principal Place of Business

21 4016 Barrancas Ave.

2a. Mailing Address

25 4016 Barrancas Ave.

22 Suite, Apt. #, etc.
Suite C

27 Suite, Apt. #, etc.
Suite C

23 City & State

Pensacola, FL

28 City & State

Pensacola, FL

24 Zip
32507.

25 Country
Escambia

29 Zip
32507

30 Country
Escambia

4. FEI Number

58-2138807

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

9. Name and Address of Current Registered Agent

BOVERT, PAUL L
4016 BARRANCAS AVENUE
PENSACOLA FL 32507

10. Name and Address of New Registered Agent

81 Name

Christopher P. Bover

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

8120 Fordham Dr.

83

84 City

Pensacola

FL

85 Zip Code
82514

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

Christopher P. Bover President

3/24/95
DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
BOVERT, PAUL L
1723 E JACKSON STREET
PENSACOLA FL 32501

2. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
BOVERT, SANDRA
1723 E JACKSON STREET
PENSACOLA FL 32501

3. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6. TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

President
Bovert, Christopher Paul
8120 Fordham Dr.
Pensacola, FL 32514

☒ Change ☐ Addition

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY - ST - ZIP

D & Sec.-Tres.
Bovert, Sandra
1723 East Jackson Street
Pensacola, FL 32501

☐ Change ☐ Addition

3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY - ST - ZIP

D
Bovert, Shelly
1723 East Jackson Street
Pensacola, FL 32501

☐ Change ☐ Addition

4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY - ST - ZIP

100001444481
-03/31/95--01013--009
***200.00 ***200.00

☐ Change ☐ Addition

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP

☐ Change ☐ Addition

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), Florida Statutes. I further certify that the information included 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. 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 affidavit.

SIGNATURE:

Christopher P. Bover
CHRISTOPHER PAUL BOVERT

3-8-1995 453-2100
HW 3-30-95

034400 CP