FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000093957 (6)**

1. Current Principal Name

CORNERSTONE FINANCIAL SERVICES, INC.

Current Principal Business Address

18303 TIMBERLAN DRIVE
LUTZ FL 33549

Mailing Address

18303 TIMBERLAN DRIVE
LUTZ FL 33549

3. Date Incorporated or Qualified: 01/01/1995

3a. Date of Last Report:

4. FEI Number: 59-3207729 [ ] 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. Does corporation have liability for intangible tax under s. 199.032 Florida Statutes? [ ] Yes [ ] No

2. Principal Place of Business

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2a. Mailing Address

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9. Name and Address of Current Registered Agent

BRONSTEIN, STEPHEN
18303 TIMBERLAN DRIVE
LUTZ FL 33549

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 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. The corporation is aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155 Florida Statutes.

12. OFFICER AND DIRECTORS

D
BRONSTEIN, STEPHEN
18303 TIMBERLAND DRIVE
LUTZ FL 33549

D
BRONSTEIN, DAVADEEN
18303 TIMBERLAND DRIVE
LUTZ FL 33549

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS LISTED IN 12

14. Under penalties of perjury, I certify that the information indicated on this report, including any required attachments, 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 13 above, or on an attachment with all other like empowered.

SIGNATURE: _____ 1/21/96 813-684-4665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

CR2E034 (12/95)