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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

Principal Place of Business

DIVISION OF CORPORATIONS

Mailing Address

DOCUMENT # 1. Corporation Name	P95000014204	(8)

PRACTICAL FINANCIAL SOLUTIONS, INC.

1184 SUEMAF DUNEDIN FL		1184 SUEMAR ROAD DUNEDIN FL 34698			
				3. Date Incorporated or Qualified 02/17/1995	3a. Date of Last Report
2. Prinopal Pla		28. Mailing Address	C. A	4. FEI Number	Applied For
21 1013	mc FARLAND St	26 1013 mc	FARLAND St	6 59-3304370	Not Applicab
Suite, Apt. #	, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State 23 Dun	eoin, FloRiDA	City & State 28 DUNCOIN	HORIDA	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3469	18 25 Pinellas		Country PINEILAS	8. This corporation has liability for Florida Statutes	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New R	egistered Agent
DUNEDIN 11. Pursuant to or registere	EMAR ROAD I FL 34698 It the provisions of Sections 607.0502 and a gent, or both, in the State of Florada, and a cept type obligations of, Sections	i. Such change was authorized i	83 84 City Dun	ass (1.0. Box Number is Not Acceptable of Ac	FL 85 Zip Code 3 469 8
SIGNATURE	t pull profession of the participation of the parti	JAY W. Bock	Presi Registimed Agenit's griature required	DENT when reinstalling	3/6/94
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
7'11.F	DOOK IAV WAYNE	DELETE	1 THE P	resident	Change Addition
NAME	BOCK, JAY WAYNE		12 NAME B	sck, Jay wayne	
STREET ADDRESS	1184 SUEMAR ROAD DUNEDIN FL 34698		13 STHEET ADDRESS //	BCK, JAY WAYNE 13 MCAARLAND Str 1010in, FIM 846	- A
CHY-S1-ZIP	DUNEUM FL 34098	FIGURE	1.4 CHTY - ST - ZIP	INCOIN, FIM 346	598
TIFLE		DELETE	Z T IIILE	-	Change Addition
NAMi			2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
Cliv St Zip		ETT DELETE	2 4 City - St - ZiP		
TILE		C DELETE	3 1 71748		☐ Change ☐ Addition
NAME			2.2 NIANAC		

64 CITY - ST - ZIP 14. If 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)(k), 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 eath, 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 changed or on an altachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - ST - ZIP

4.4 CITY - \$1 - ZIP

34 CITY - S1 - ZIP

4 1 TITLE

4.2 NAME

5 1 TITLE

5.2 NAME

6 171716

5.2 NAME

SIGNATURE: 1/2

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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CITY - S1 - ZP1

CITY ST-ZIE

C-14-51-7.P

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3/6/96 813-736-6639

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