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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000087051 1. Corporation Name

GENESIS FINANCIAL NETWORK INC.

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90099 005 ***150.00



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Principal Place	of Business	Mailing Address		<u> </u>		110	1911981 119 IEI	WI W ILE W EI	{ 0 01() 00()) 19)	9 1 (9 14) (0 1		#11#4 J1#1 >##1	
13339 CORTEZ BROOKSVILLE F		13339 CORTEZ BLVD. BROOKSVILLE FL 34613-4888				DO NOT WRITE IN THIS SPACE							
						3. Date In 01/01	,	or Qualif	ed				
A D: := 1D	and of Divisions	2a. Mailing Address				4. FEI Nur	<u> </u>			— Т	An	plied For	
	ace of Business	2a. Maining Address			- -	59-3351272				Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.								\$8	.75 A	dditional	
22		27				5. Certifca	ite of Statu	s Desired		F	ee Re	quired	
City & State		City & State				6. Election	Campaigr	n Financir	ng	\$	5.00	Мау Ве	
23		28				Trust Fund Contribution				A	Added to Fees		
Zip	Country	Zip	Coul	itry		8. This co.	rporation o	wes the c	urrent year l				
24	25	29	30			Personal Property Tax. 10. Name and Address of New Registered Age						□No	
	9. Name and Address of Current	Registered Agent		- 1 7		10. Name a	and Addre	ss of Ne	w Registere	d Agent			
			ſ	81 Name	e								
CORNETT, PATRICIA A				82 Stree	at Address	(P.O. Box	Number is	Not Acce	eptable)				
13339 CORTEZ BLVD													
BRO	OKSVILLE FL 34613-4888			83									
			ļ	84 City						85	Zip C	Code	
			ĺ						<u>F</u>				
	o the provisions of Sections 607.0502 ggistered agent, or both, in the State on In familiar with, and accept the obligati				d corpora rporation's	ition submits s board of d	s this state irectors. 1 1	ment for t nereby ac	he purpose of cept the app	of chang ointmen	ing its t as re	registered gistered	
SIGNATURE		ADTE	Bogistered	Agont eignatur	e cominad wh	nen reinstating)			DATE				
	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent signaturi	e required wit	ADDITIC	NS/CHAN	GES TO	OFFICERS /	AND DIF	RECTO	RS IN 12	
TITLE	P OFFICERS AND	DIRECTORS DELETE	1.1 707	ı.E	TP				-		hange	Addition	
'''	MAGUIRE, FLORENCE		1,2 NA		MAG	GUIRE.	, FLO	RENC	E				
NAME	11331 OBNAGEWOOD CT-			··· REET ADDRES		331 01							
STREET ADDRESS	SPRING HILL FL 34609			Y-ST-ZIP		RING I			34609	€			
CITY-ST-ZIP	V	X D€LETE	2.1 TIT		T V	1	<u></u>				hange	X Addition	
TITLE	HOLSTAD, MARY	22 30	2.2 NA		BUT	LER.	SHIRI	LEY	,				
NAME	9448 NORTHCLIFF BLVD			REET ADDRES	722	9 COV					. سيد	.	
STREET ADDRESS	SPRING HILL FL 34606		1	ry-st-zip	:	KI WA		FL	3460	7			
CITY-ST-ZIP	T	□ DELETE	3.1 TIT		T					X C	hange	☐ Addition	
TITLE	PASTORI, BETTY	_ == · · -	3.2 NA		PAS	TORI,	BET:	ΓY					
NAME	11332 ORNAGEWOOD OT-			REET ADDRES	1	32 OR			CT				
STREET ADDRESS	SPRING HILL FL 34609			ry-st-zip		ING H		FL	34609				
CITY-ST-ZIP TITLE	S	☐ DELETE	4.1 177		1						hange	Addition	
NAME	MCGROGAN, SUE		4. 2 N		{								
	6347 AIRMONT DR		4.3 ST	REET ADDRES	ss								
STREET ADDRESS	SPRING HILL FL 34606			Y-ST-ZIP							,		
CITY-ST-ZIP TITLE	Or rate rate i b orton	☐ DELETE	5.1 TIT		1						hange	☐ Addition	
NAME			5.2 NA		l								
STREET ADDRESS			5.3 \$1	REET ADDRES	ss							i	
CITY-ST-ZIP			5.4 CT	Y-ST-ZIP	1								
TITLE		☐ DELETE	6.1 TI	LE							hange	☐ Addition	
NAME		_	6.2 NA	ME									
			6.3 ST	REET ADDRES	ss								
STREET ADDRESS			6.4 CF	Y-ST-ZIP									
i city-st-zip I										11.0			

14. I hereby certify that the information supplied with this filing does not quality 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 conforation 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, with all other like empowered.

SIGNATURE: