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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**FILED** 

May 20 1997 8:00am

Secretary of State

DOCUMENT # P95000097777 (3)

MONEY MANAGEMENT ASSOCIATES, INC.

Principal Place 2055 OCEAN DI BUITE C-1 VERO BEACH F	RIVE	Mailing Address 2855 OCEAN DRIVE SUITE C-1 VERO BEACH FL 32963-20	20	··		
		AEUG DENGII EE 35303-50			3. Date Incorporated or Qualified 01/01/1996	3a. Date of Last Report
	ace of Business	2a. Mailing Address			4. FEI Number 65 - 0628923	Applied For
Suite, Apt.	H oto	<b>26</b>			53-067617	Not Applicable  \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28]			Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip [29]	Oountr 30	У	8. This corporation has liability for Florida Statutes	intangible tay under s. 199.032, Yes M No
	9. Name and Address of Curren				10. Name and Address of New Re	gistered Agent
2855 SUIT VERO	ERSON, MARIE M OCEAN DRIVE E C-1 D BEACH FL 32963 to the provisions of Sections 607,050	02 and 607.1508, Florida Statut	81 82 83 84 85 86 86	Street Add	fress (P.O. Box Number is Not Acceptate poration submits this statement for the pation's board of directors. I hereby acceptation	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered agr	ent and title if applicable (NOT	It Registered A		uired when reinstating)	DATE
12.		ID DIRECTORS	13.	····	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12  Change Addition
TITLE NAME	PTD [_] DELETE ANDERSON, MARIE M		1.) TITLE 1.2 NAME			Cualific 17 Vocition
STREET ADDRESS	2855 OCEAN DRIVE, SUITE C-	. <b>1</b>		E1 ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963	•	1.4 CITY-			
THILE	VSD DILETE		2.1 111LE			☐ Change ☐ Addition
NAME	PARADISE, RODNEY C SR.		2.P NAME			
STREET ADDRESS	2855 OCEAN DRIVE, SUITE C-	-1	2.B STRE	ET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL 32963		2.4 CITY			Change Addition
TITLE		L.J DETETE	3.1 111LE 3.2 NAME			L Change L Addition
NAME STREET ADDRESS				ET AODRESS		
CITY-ST-ZIP			3 4, 01Y			
TITLE	DELETE		41 11111			Change Addition
NAME			4 2 NAM	ıı J		
STREET ADDRESS			4 B STRE	ET ADDRESS		
CITY-ST-ZIP			4 4 CHY	- S1 - 7IP		
TITLE	DEFETE		5/1 1111.0			Change Addition
NAME			5 P NAMI	ŧ		
STREET ADDRESS			5,3 STRE	FT ADDRESS		
CITY+\$1-ZIP			5 4 CITY			
TITLE		☐ DELETE	Gh THLE			Change Addition
NAME			65 NVM			
STREET ADDRESS			63 STRE	ET ADDRESS		

City-St-Zip

14. I do hereby certify that the information supplied with this filing does not qualify 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.