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

**PROFIT CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000010280 (1)

FINANCIAL 2000, INC.

## **FILED** Mar 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						a indurindet tim amien mitter mastel mutte unter Bufel felbet diffet iffill fiffel iffill		
704 PENNYROYAL PLACE 704 PENNYROYAL PLACE								
BRANDON	, FL 33	510	BRANDON, FL 33510					DO NOT INDITE IN THIS COACE
								DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
2. Principal P	lace of Busi	ness	2a.	Mailing Address				01/30/1996 4. FEI Number Applied For
704 PENNYROYAL PLACE				26 704 PENNYROYAL PLACE				1,55,65101
Suite, Apt. #, etc.			Suite, Apt. #, etc.			- DI	10D	SR 75 Additional
22			27					5. Certificate of Status Desired Fee Required
City & State			1	City & State				6. Election Campaign Financing \$5.00 May Be
23 BRANDON, FL			28	28 BRANDON, FL				Trust Fund Contribution Added to Fees
Zip	_	Country	1	Zip	Co	untry		8. This corporation owes or has paid the current year intangible
24 33510	0	25 HILLSBOROUGH	1 29	33510	30 HI	LLS	SBOROU	
	g, Name	and Address of Current	Regis	tered Agent	··· • · · · · · · · · · · · · · · · · ·	T		10. Name and Address of New Registered Agent
KLF	EIN, WILLIA	M R				81	Name	
	704 Privile Office Privile Pri							Address (D.O. Day N. Landay In Alas Assessable)
BRANDON, FL 33510						82 Street Address (P.O. Box Number is Not Acceptable)		
DIA	INDUN,	EL JUJIO				83		
						Ш		
						84	City	FL 85 Zip Code
44 Purcuant	to the provis	ions of Sections 607 0502	and 6	07 1508 Florida Statu	itor the e	hous	nomod c	
office or r	egistered ag	ent, or both, in the State	Florid	da. Such change was	authorize	d by	the corpo	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	ım familiar w	ith, and occept the onlygat	ons ol					11.0
SIGNATURE		allow 100		Wil	4117		1211	Kld='w
12.	Signature typed	or printed name of registored agent OFFICERS AND				ed Age	nt signature n	required when reinstating) DATE
TITLE	P	OFFICERS AND	DIME	DELETE	13.	171.5	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
		181 1 1 1 1 1 1 B			1.1 T			
NAME		MILLIAM R	T?		1.2 N			
STREET ADDRESS		ENNYROYAL PLAC	E				ADDRESS	
CITY-ST-ZIP	RRVIND	DN, FL. 33510		T DC: FTE		ITY-S	T- ZIP	
TITLE				☐ DELETE	2.1 T		1	DIRECTOR
NAME					2.2 N			WILLIAM T. BAYNARD, JR.
STREET ADDRESS					2.3 S	TREET	ADORESS	1432 BRIGHTWATERS BLVD. N.E.
CITY-ST-ZIP					2.40	CITY-S	T-ZIP	ST. PETERSBURG, FL 33704
TITLE				☐ DELETÉ	3.1 T	1TLE	ĺ	Change Addition
NAME					3.2 N	IAME		
STREET ADDRESS					3.3 S	TREET	ADDRESS	
CITY-ST-ZIP					3.4. (	CITY-S	T-ZIP	
TITLE				☐ DELETE	4.1 T	ITLE		Change Addition
NAME					4.21	NAME		
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP						(TY-SI		
TITLE				DELETE	5.1 T			Change Addition
NAME					5.2 N		}	
STREET ADDRESS	1						ADDRESS	
CITY-ST-ZIP TITLE				DELETE		ITY-SI	- ZIP	Channa Addition
				₩ DELETE	6.1 Ti			Change Addition
NAME					6.2 N			
STREET ADDRESS					6.3 S	TREET	ADDRESS	
CITY-ST-ZIP					64 C	ITY - ST	- 7IP	

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attack near with an address.

SIGNATURE: