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FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000016005 (6)

1. Corporation Name  
FALCON TRUST CORP.

Principal Place of Business

Mailing Address

640 NW 160 ST  
REDDICK FL 32686  
US

P.O BOX 759  
REDDICK FL 32686  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/21/1996

4. FEI Number

59-6867458

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

X

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 6400 N.W. 160 ST.

26 P.O. Box 759

Suite, Apt. # etc.

Suite, Apt. # etc.

22 Reddick, FLA.

27 Reddick

City & State

City & State

23 32686

28 FLA.

Zip

Country

Zip

Country

24 MARION

29 32686

Country

30 MARION

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAWALLIS, MILO  
5850 N.E. 14TH ROAD  
FT. LAUDERDALE FL 33334

81 Name

Milo R. Sawallis

82 Street Address (P.O. Box Number is Not Acceptable)

6400 N.W. 160 ST.

83

P.O. Box 759

84

Reddick

FL

85 Zip Code

32686

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0502 Florida Statutes.

SIGNATURE

Milo R. Sawallis

Signature, typed or printed name of registered agent and the if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/13/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D

SAWALLIS, MILO

STREET ADDRESS 6400 NE 160 ST., P.O BOX 759

CITY-ST-ZIP REDDICK FL

TITLE ☐ DELETE

NAME D

SCHMIDT, VIRGINIA S

STREET ADDRESS 6400 NW 160 ST., P.O BOX 759

CITY-ST-ZIP REDDICK FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 attachment with an address.

SIGNATURE:

Milo R. Sawallis

4/13/98

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CR2E034 (10/97)