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Apr 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000020005 (0)

1. Corporation Name  
CNL FINANCIAL I. INC.

Principal Place of Business  
400 E SOUTH ST. SUITE 500  
ORLANDO FL 32801

Mailing Address  
400 E SOUTH ST. SUITE 500  
ORLANDO FL 32801



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/05/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3392403	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fees Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

BOURNE, ROBERT A  
400 E SOUTH ST, SUITE 500  
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCEO	1.1 TITLE	D/C/CEO
NAME	SENEFF, JAMES M JR	1.2 NAME	SENEFF, JAMES M., JR.
STREET ADDRESS	400 E SOUTH ST, SUITE 500	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	
TITLE	PTD	2.1 TITLE	D/VC
NAME	BOURNE, ROBERT A	2.2 NAME	BOURNE, ROBERT A.
STREET ADDRESS	400 E SOUTH ST, SUITE 500	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	ROSE, LYNN E.	3.2 NAME	
STREET ADDRESS	400 E. SOUTH ST., STE 500	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	EVP	4.1 TITLE	
NAME	MCDUGALL, ED	4.2 NAME	
STREET ADDRESS	400 E SOUTH ST., STE 500	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	P
NAME		5.2 NAME	MCWILLIAMS, CURTIS B.
STREET ADDRESS		5.3 STREET ADDRESS	400 E. SOUTH ST., SUITE 500
CITY-ST-ZIP		5.4 CITY-ST-ZIP	ORLANDO, FL 32801
TITLE		6.1 TITLE	EVP/COO
NAME		6.2 NAME	FLUCK, BRIAN
STREET ADDRESS	PLEASE SEE ATTACHMENT	6.3 STREET ADDRESS	400 E. SOUTH ST., SUITE 500
CITY-ST-ZIP		6.4 CITY-ST-ZIP	ORLANDO, FL 32801

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 in an attachment with an address.

SIGNATURE:  CURTIS B. MCWILLIAMS 4/7/98 (407) 422-1574

Z935946626 4/13/98

CR2E034 (10/97)

CNL FINANCIAL I, INC.

ADDITIONAL OFFICERS & DIRECTORS

V                    ADD  
FARREN, JOHN  
400 E. SOUTH ST., SUITE 500  
ORLANDO, FL 32801

T                    ADD  
MOORHEAD, HENRY  
400 E. SOUTH ST., SUITE 500  
ORLANDO, FL 32801