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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

14. I do hereby certify that the information sup-information indicated on this annual repor-I am an officer or director of the corporation appears in Block 12 or Block 13 changed



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 30 1997 8:00am

Secretary of State

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000030383 (9)

CURRAN FINANCIAL CONSULTING, INC.

					•				
Principal Place of Business Mailing Address						- I TOBANIOUN ALB NOTHE OTHER DOWN OCCUPY BOTH			12 (11) 1101
4341 LANDMARK DRIVE ORLANDO FL 32817		4341 LANDMARK DRIVE ORLANDO FL 32817-1212	4341 LANDMARK DRIVE ORLANDO FL 32817-1212						
						3. Date Incorporated or Qualified 04/01/1996	3a. [Date of Last R	eport
_	lace of Business	2a. Mailing Address				4. FEI Number		Ar	oplied For
Sulte, Apt.	# 010	26				.19-337506	· /		ot Applicable
22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State	¬ ´			6. Election Campaign Financing \$5.00 May Be			
Zip	Country	28	Cour	itru	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	<u> </u>	Added t	
24	25	29	30	ııı y		8. This corporation has liability for i	ntangibi Yes		. 199.032,
<u> </u>	9. Name and Address of Current		1301			10. Name and Address of New Reg			
CUR	RAN, BARRY W			81	Name		·	- 	-
	LANDMARK DRIVE			82	Stroot Addr	ess (P.O. Box Number is Not Acceptab			·····
ORL	ÁNDO FL 32817		ľ	02	atreet Addit	ess (r.o. box number is not Acceptab	.e)		
			1	83					
			<u> </u>	84	City			85 Zip (Code
							FL	_ ' '	
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State (? and 607.1508, Florida Statu of Florida, Such change was	ites, the ab authorized	ove by	∋-named corporati	oration submits this statement for the pon's board of directors. I hereby accep	urpose o	of changing it	s registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statu	iles	3.	and a survey about	τιιο αρι	pointment da	registorea
SIGNATURE	Signature, typed or printed name of registored agen	and life developed (MC	TI FOUNDATION	×		ed whon reinstating)			
12.	OFFICERS AND		13.	Age	ni signature require	ADDITIONS/CHANGES TO OFFIC	DATE FRS AN	D DIRECTOR	RS IN 12
TITLE	D DELETE			1.1 TITLE				Change	Addition
NAME	CURRAN, BARRY W		1.2 NA	NAME					_
STREET ADDRESS	4341 LANDMARK DRIVE	1.3		1.3 \$TREET ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32817			1.4 C(1) Y - \$1 - Z(P					
TITLE	D	☐ DELETE	2.1 1111	2.1 1/11EF 2.2 NAME				Change	Addition
NAME	CURRAN, VICTORIA A		2.2 NAN						
STREET ADDRESS	4341 LANDMARK DRIVE		I I		ADDRESS	3.			
CITY-ST-ZIP	ORLANDO FL 32817	DELETE	2. 4 CIT		51 - ZIP				1.400
. Title Name			3.1 1171		1			☐ Change	☐ Addilion
STREET ADDRESS			3.2 NAN		ADDRESS				
CITY-ST-ZIP			3.3 STR 3.4. CIT						
TITLE		DELETE	4.1 TITE		11-211			Change	Addition
NAME			4. 2 NAI		}				
STREET ADDRESS			4.3 S1R	EET.	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP		T-ZIP				}
TITLE	ITLE		5.1 TITLE					Change	Addition
NAME			5.2 NAN	ΛE					
STREET ADDRESS			5.3 \$TR	£1.	ADDRESS				
CITY-ST-ZIP	1		5.4 C(1)		I - ZIP				
TITLE		☐ DELETE	6.1 TITL					Change	☐ Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STR	EET a	ADDRESS				

ed with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that or the receiver or true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name or open attachmy in with an address.

6.4 CITY - ST - 7IP