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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000036042 (5)

PROTECTIVE FINANCIAL GROUP, INC.

Principal Place of Business

Mailing Address

3901 BRAMBI EWOOD BLVD

3801 BRAMBLEWOOD BLVD.

FILED May 05 1997 8:00am Secretary of State



LAND O LAKES		•	ĭ	LAND O LAKES FL 34839-5512										
									3. Date in 04/22/	corporated of	r Qualified	3a. Da	ate of Last ne	Report
2. Principal Pi			L	, Mailing Addr		**			4. FEI Nu	mber		·		Applied For
21 2701	N. Ro	cky Point	Dr 26	2701 N	Ros	<u>cky</u>	Point	Dr	. 59	-33695	05			Not Applicable
Suite, Apt. #, etc 22 Ste. 1.000				Suite, Apt. #, etc. 27 Ste. 1000					5, Certificate of Status Desired See Required					,
City & State				City & State					6. Election	n Campaign f	inancino		\$5.0	May Be
23 Tampa, FL				28 Tampa, FL					Trust Fund Contribution Added to Fees					
Ζιρ		Country		Zip	l	Cou	-		8. This co	rporation has				s. 199.032,
24 33607		25 USA		33607		30 U	SA			Statutes		Yes		
		and Address of Cu	rrent Reg	istered Agent			##1 ##			and Address		istered	Agent	
	WLES, EM					(81 Name MOY	ale	s, Em	ilio J	r			
1500 LIME STREET							82 Street	Addres	s (P.O. Box	Number is N	ot Acceptab	le)		
CLEARWATER FL 34616							270	<u>1 N</u>	Roc	ky Poi	nt Dr	<u>. St</u>	<u>e. 10</u>	000
						ļ	83							
							84 City							Code
							64 City Tan	pa,				FL	77	507
11. Pursuant	to the provis	ions of Sections 607	0502 and	607.1508, Florid	da Statute	s, the ab				its this statem	ent for the pr	urpose o	f changing	its registered
agent. I a	ım familiar	ions of Sections 607 ient, or both, in the lin, and a sept the	bligations	of Section 607.	0505, Flo	rida Stat	utes.	الكرا طائل	is a booking of	Grigorors, []]	erent acceb	ւստաբի	romannont c	re reAlerered
SIGNATURE			wal											
bioliti i bil	Signature, types	or printed name of registers	เส้ สดูอกเ มาซ ti	te if applicable.	INOTE		Agent signature	required	when reinstating			DATE		
12.		OFFICERS	AND DIR			13.				ONS/CHANGE	S TO OFFIC	ERS AND		
TITLE	P	. = 4 4 4 4		☐ DE	LE1E	1.1 []	LE		eside				Change	Addition Addition
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STREET ADDRESS		MBLEWOOD BLV	D.			1.3 ST	REET ADDRESS			Rocky		b Dr	Ste.	1000
Cify - ST - ZiP	LAND O	LAKES FL 34639				1.4 CI	Y-ST-ZIP			FL 336				
TITLE				□ ĐE	LETE	2.1 7/1	LE			ice Pr			Change	Addition
NAME)					2.2 N/	ME	Mo	rales	, Paul	a R.			
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NAME .]					6.2 N	ME							
STREET ADDRESS						63 ST	REET ADDRESS							
CITY - ST - ZIP						4	ry-st-zip	{						
VIII VII 6														

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

SIGNATURE:

Daytime Phone #

Date