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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS		y of State	Secretary of State	
1	JMENT # P96000 NANCIAL SERVICES, INC.	0046357 (5)			
ribrii	NAMOIAL BENVICES, INC.				
Principat Place of Business 1211 ORANGE AVE. WINTER PARK FL 32789-4942		Mailing Address 1211 ORANGE AVE. WINTER PARK FL 32789-4909		I HODIVORI NO PRINC ANNI SUIN DENI EDIN GONI DINO DINO LINO) ONNI HODI SUGI	
				3. Date Incorporated or Qualified 05/31/1996	3a. Date of Last Report
2. Principal	Place of Business	2a. Mailing Address 26		4. FEI Number 59–3403709	Applied For Not Applicable
Suite, Ap	l ≠, εtc.	Suite, Apt. #, etc.	······································	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ate	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
7ip	Country 25	Zip 29	Country 30	8. This corporation has liability for it Florida Statutes	ntangible tax under s. 199.032, Yes DNo
	9. Name and Address of Curre			10. Name and Address of New Re	
	ER & DOUGHERTY, P.A.		81 Name		
1501 PARK AVE. EAST			82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
IA	LLAHASSEE FL 32301		83		
}			84 City		85 Zip Code
			1 1 7		FL []
11. Pursuan office or agent. I	it to the provisions of Sections 607 050 registered agent, or both, in the State am familiar with, and accept the oblic	02 and 607.1508, Florida Statute o of Florida. Such change was a rations of, Section 607.0505, Flo	s, the above-named cor uthorized by the corpora rida Statutes.	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changing its registered it the appointment as registered
SIGNATURE					
12.	Signature, typicd or product name, of registered ago OFFICERS AN	ion) and title if applicable. (NOTE ID DIRECTORS	Registered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	FRS AND DIRECTORS IN 12
MILE	PD	DELETE	1.1 TITLE		Change Addition
NAME	SUSKIEWICH, JAMES V		1.2 NAME		
STREET ADDRESS) 1211 011112		1.3 STREET ADDRESS		
CITY-ST-ZiP	WINTER PARK FL 32789-4942		1.4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	Distance Distance
THEF NAME	VSTD Brodnax, Jennifer	DELETE	2.1 TITLE 22 NAME		Change Addition
STREET ADDRESS	1411 451145 4155		2.3 STREET ADDRESS		
City-S1-ZiP	WINTER PARK FL 32789-4942	2	2. 4 CITY-ST-ZIP		
TITLE) D	DELETE	3.1 TITLE		Change Addition
NAME	WRIGHT, AUBREY		3.2 NAME	' a ',	±yr.♥
STREET ADDRESS	1211 ORANGE AVE. WINTER PARK FL 32789-4942	•	3.3 STREET ADDRESS		:
THE	WHITER FAIRN FL SC100-4846	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		-	4. 2 NAME		- • ·
STREET ADDRESS	5		4.3 STREET ADDRESS		
CITY - S1 - 7IP			4.4 CITY-ST-ZIP		
THEF		☐ DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		ı
001Y - ST - 21F			5.4 City-St-Zip		
1914		DELETE	6.1 TITLE	<u>- u</u>	Change Addition
NAME			6.2 NAME		
STREET ADDRESS	3		6.3 STREET ADDRESS		

CHY-SI-7IP

14. I 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 arm 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 it changed, or on an attachment with an address.

SIGNATURE:

FILED

Apr 01 1997 8:00am