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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600055403 (5)

APPROVAL FIRST MORTGAGE CORPORATION

Principal Plac	ce of Business	Mailing Address			T 108/45 A 100 17110 BINK EQUIL OBIN ONIO OLIGI ONIO OLON ONIO EDION INI 1001
3510 \$ FL AVE 3510 \$ FL AVE					
102   Lakeland FL 33803-4874			74		DO NOT WRITE IN THIS SPACE
US US					3, Date Incorporated or Qualified
					07/01/1996
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
Suite, Apt	# etc	Suite Ant # etc	Suite, Apt. #, etc.		59-3387020   Not Applicabl
22	. ", 010.	27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	у .	8. This corporation owes or has paid the current year Intangible
24 25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
Od Nome					INI
CLARK, RONALD L 4740 CLEVELAND HEIGHTS BOULEVARD			8:	Stroot Add	Iress (P.O. Box Number is Not Acceptable)
LAKELAND FL 33813			•	Stieet Addi	ress (F.O. Box Number is Not Acceptable)
]			8	3	
			8	City	■■ 85 Zip Code
	1				FL [T]
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. Le	am familiar with, and accept the ol	bligations of, Section 607.0505, F	lorida Statute	es.	• • • • • • • • •
SIGNATURE	Signature, typed or printed name of registered	1 speni and title if applicable //NC	JE Registered A	oent signature requir	ired when reinstaling) DATE
12.		AND DIRECTORS	13.		
TITLE	D	☐ DELETE	1.1 TITLE	8	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	CLARK, RONALD L		1.2 NAME		TO G Storials Due Sto ho
STREET ADDRESS 4740 CLEVELAND HEIGHTS E		S BOULEVARD		T ADDRESS 3	510 S. Florida Ave. Ste. 102 ateland, FL 33803
CITY-ST-ZIP	LAKELAND FL 33813	DELETE	1.4 CHTY-	ST-ZIP CO	ACEIONO, FC 33803
NAME			2.1 TITLE 2.2 NAME		- Citalige Citation
STREET ADDRESS				T ADDRESS	`
CITY-ST-ZIP	]		2.4 CITY		
TITLE		DELETE	3.1 TITLE	<u> </u>	☐ Change ☐ Addition
NAME	1		3.2 NAME		
STREET ADDRESS	]		3.3 STREE	T ADDRESS	
CITY-ST-ZIP		T sales	3.4. CITY	-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME CONCER ADDRESS			4. 2 NAM		
STREET ADORESS CITY-ST-ZIP			4.3 STREE	T ADDRESS	•
TITLE		DELETE	5.1 TITLE	21-5H	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP_			5.4 CITY		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREE	T ADDRESS	
CITY_ST. 7ID	1		C A CITY	CT 710	

14. Thereby 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 angual 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 infector of the corporation or the receiver of true life on powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on an attach from the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the receiv