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FILED
May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000061873 (1)

1. Corporation Name

GWV FINANCIAL CORP.

Principal Place of Business

250 AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33401

Mailing Address

250 AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33401-5012

3. Date Incorporated or Qualified

07/24/1986

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

65-0682742

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREEHAUF, KIMBERLY A
C/O MIG FINANCIAL COMPANIES
250 AUSTRALIAN AVENUE SUITE 400
WEST PALM BEACH FL 33401

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

TITLE D
NAME GUTIN, KATHLEEN L
STREET ADDRESS 250 AUSTRALIAN AVENUE STE 400
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ DELETE

TITLE D
NAME VOGT, LOUIS E
STREET ADDRESS 250 AUSTRALIAN AVENUE STE 400
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ DELETE

TITLE D
NAME WHATLEY, CAROLYN A
STREET ADDRESS 250 AUSTRALIAN AVENUE STE 400
CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVP/ASST. Sec.
1.2 NAME Kathleen L. Gutin
1.3 STREET ADDRESS 250 Australian Ave S #400
1.4 CITY-ST-ZIP West Palm Beach, FL 33401

☒ Change ☐ Addition

2.1 TITLE DVP/ASST. Sec.
2.2 NAME Louis E. Vogt
2.3 STREET ADDRESS 250 Australian Ave S #400
2.4 CITY-ST-ZIP West Palm Beach, FL 33401

☒ Change ☐ Addition

3.1 TITLE DVP
3.2 NAME Carolyn A. Whatley
3.3 STREET ADDRESS 250 Australian Ave S #400
3.4 CITY-ST-ZIP West Palm Beach, FL 33401

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kathleen L. Gutin

Date

4/23/97

Daytime Phone #

561-820-1300

0294696

CR2E034 (9/96)