


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

FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P96000068763 (7) 1. Corporation Name PMR FINANCIAL SERVICES, INC.		

Principal Place of Business 2631 N.W. 41ST STREET, C-3 GAINESVILLE FL 32606-6689	Mailing Address 2631 N.W. 41ST STREET, C-3 GAINESVILLE FL 32606-6689
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7001 SW 24th AVE Suite, Apt. #, etc. 22		2a. Mailing Address 26 7001 SW 24th AVE Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 06/15/1996	
City & State 23 Gainesville FL Zip Country 24 32607 25		City & State 28 Gainesville FL Zip Country 29 32607 30		4. FEI Number 59-3398037 Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BALDWIN, MICHAEL K 2631 N.W. 41ST STREET, C-3 GAINESVILLE FL 32606-6689				10. Name and Address of New Registered Agent	
				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 *Michael K. Baldwin* *MICHAEL K. BALDWIN Pres.* DATE 4-17-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PO	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BALDWIN, MICHAEL K			1.2 NAME			
STREET ADDRESS	825 NW 80TH BLVD			1.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL			1.4 CITY-ST-ZIP			
TITLE	D-VP	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BALDWIN, JOHN D III			2.2 NAME			
STREET ADDRESS	3981 W UNIVERSITY AVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL			2.4 CITY-ST-ZIP			
TITLE	D-SELY	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CHRISTOPHER BALDWIN			3.2 NAME			
STREET ADDRESS	525 NW 80th Blvd			3.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL 32607			3.4 CITY-ST-ZIP			
TITLE	VP-D	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DARREN NANTZ			4.2 NAME			
STREET ADDRESS	7400 STATE RD 21			4.3 STREET ADDRESS			
CITY-ST-ZIP	KeySTONE FL 32656			4.4 CITY-ST-ZIP			
TITLE	TREASURER - D	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RICKY C. LEFAVE			5.2 NAME			
STREET ADDRESS	7907 SW 6 PLACE			5.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 32607			5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I 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 *Michael K. Baldwin* DATE 4-17-98

CR2E034 (10/97)