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

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May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000070497 (8) **CARNEY FINANCIAL CORPORATION** Principal Place of Business Mailing Address 1101 NO CONGRESS AVE STE 200 1101 NO CONGRESS AVE STE 200 **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0698241 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6, Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zŧρ Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. ☐ Yes 24 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name CARNEY, PETER H 1101 NO CONGRESS AVE STE 200 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33426** 83 84 Zip Code City 85 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 profest name of registered agont and little if applicable (NOTE: Registered Agent signature requ ed when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE CARNEY, THOMAS F JR. NAME 12 NAME 1101 NO CONGRESS AVE STE 200 1.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33426** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME CARNEY, PETER H 2.2 NAME 1101 NO CONGRESS AVE STE 200 STREET ADDRESS 2.3 STREET ADDRESS **BOYNTON BEACH FL 33426** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE ( Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITE F NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

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 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 coporation or the receiver a 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 chapted, or on an attachment with an address.

**FILED**