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Jul 01 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 # P96000074585 (6)

1. Corporation Name

TIKI FINANCIAL SERVICES, INC.

Principal Place of Business

1000 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714

Mailing Address

1000 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714-3805



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

09/05/1996

3a. Date of Last Report

4. FEI Number

59-3399810

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

RANDOLPH, TIMOTHY V
1000 SUNSHINE LANE
ALTAMONTE SPRINGS FL 32714

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

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 P
NAME TIMOTHY V. RANDOLPH
STREET ADDRESS 100 LAKE RENA DR.
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE S
NAME Margaret D. RANDOLPH
STREET ADDRESS 122 LAKE RENA DR.
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE V
NAME MASON MILES III
STREET ADDRESS 201 BARRY CT
CITY-ST-ZIP Longwood FL 32779

TITLE D
NAME TIMOTHY V. RANDOLPH II
STREET ADDRESS 207 Churchhill Dr
CITY-ST-ZIP Longwood FL 32779

TITLE M
NAME JEFFREY STANPHILL
STREET ADDRESS 4488 SHUMARD OAK CT.
CITY-ST-ZIP ORLANDO, FL 32808

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

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

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

Change ☐ Addition ☐

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☐ 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:

TIMOTHY V. RANDOLPH 6-25-97 (407) 862-8333

CR2E034 (9/96)