

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 APR 10 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000089163 (5)

1. Corporation Name

CAPITAL ASSET SETTLEMENT SERVICES, INC.

Principal Place of Business

1700 PALM BEACH LAKES BOULEVARD
SUITE 1100
WEST PALM BEACH FL 33401

Mailing Address

1700 PALM BEACH LAKES BOULEVARD
SUITE 1100
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 3950 RCA Blvd.

Suite, Apt. #, etc.

22 Suite 5001

City & State

23 Palm Beach Gardens, FL

Zip

24 33410

Country

25 USA

2a. Mailing Address

26 3950 RCA Blvd.

Suite, Apt. #, etc.

27 Suite 5001

City & State

28 Palm Beach Gardens, FL

Zip

29 33410

Country

30 USA

3. Date Incorporated or Qualified

10/29/1996

4. FEI Number

65-0759523

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4524 PGA BOULEVARD
SUITE #211-
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name C T CORPORATION SYSTEM

82 Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

83

84 City

Plantation

FL

85 Zip Code

33324

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 607.0502, Florida Statutes.

SIGNATURE

Joseph Whelihan

SPECIAL ASSISTANT SECRETARY

4/10/98

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE DP
NAME HEITMEYER, RICHARD
STREET ADDRESS 1700 PALM BEACH LAKES BOULEVARD, STE 1100
CITY-ST-ZIP WEST PALM BEACH FL

TITLE SVP
NAME RAMSEY, JOHN E.
STREET ADDRESS 3414 PEACHTREE RD., STE. 680
CITY-ST-ZIP ATLANTA GA

TITLE T
NAME GREETHAM, DONALD
STREET ADDRESS 1700 PALM BEACH LAKES BLVD., STE. 1100
CITY-ST-ZIP W. PALM BEACH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 3950 RCA Blvd. Suite 5001
1.4 CITY-ST-ZIP Palm Beach Gardens, Florida 33410

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 3950 RCA Blvd. Suite 5001
3.4 CITY-ST-ZIP Palm Beach Gardens, Florida 33410

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

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:

Joseph Whelihan

04/07/98

561-515-1000

CR2E034 (10/97)