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CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000093951

1. Corporation Name

VALENTINE FINANCIAL, INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90129 038 ***150.00



Principal Place of Business Mailing Address 122 ARLINGTON ROAD NORTH JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/18/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Suite, Apt. #, etc. Suite, Apt. #, etc. 25 City & State City & State City & State Zip Country Applied For South, Apt. #, etc. Suite, Apt. #, etc. Since Country Election Campaign Financing Trust Fund Contribution Added to Fees Applied For Not Applicable See Required 5. Certificate of Status Desired Fee Required Added to Fees Applied For Not Applicable See Required Suite, Apt. #, etc. Suite,										
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2. Principal Place of Business 2a. Maling Address 573-3412450 Not Applicable Sulfe, Apt. #, etc.										
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City & State City & Country Zip		#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired				
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Zip Country Zip	City & State		City & State			1 ' - 11		· · · · · · · · · · · · · · · · · · ·		
Zip						Trust Fund Contribution	Added	to Fees		
9. Name and Address of Current Registered Agent KATZ, HARRY JR. 337 EAST FORSYTH STREET JACKSONVILE FL 32202 40 City 41. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In affords or registered agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. In affords or registered agent. In affords or registered agent, and accept the obligation of Section Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. In affords or protections of Section Statutes. Provided the corporation submits this statement for the purpose of changing its registered agent. In affords or registered agent. In affords the submits the statement for the purpose of changing its registered agent. In affords or protection in the State of Florids Statutes. Provided the corporation submits this statement for the purpose of changing its registered agent. In affords or protection in the State of Florids Statutes. Provided the appointment agent and the registered agent. In affords the statement for the purpose of changing its registered agent. In affords the appointment agent agent. In affords the appointment agent agent. In affords a purpose of changing its registered agent. In affords the appointment agent agent. In affords the appointment agent agent. In affords the appointment agent agent. In affords a purpose of changing its registered agent. In affords the appointment agent agent. In affords a purpose of changing its registered agent. In affords the appointment agent agent. In affords a purpose of changing its registered agent. In affords the appointment agent agent. In affords a purpose of changing its registered agent. In affords a purpose of changing its registered agent. In affords a purpose of changing its registered agent. In affords a purpose of cha		Country Zip C			<u>.</u>					
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KATZ, HARRY JR. 337 EAST FORSYTH STREET JACKSONVILLE FL 32202 82 Street Address (P.O. Box Number is Not Acceptable) 83 Bab City		9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered A	Agent ,		
337 EAST FORSYTH STREET JACKSONVILLE FL 32202 182 STREET ADDRESS 68 City FL				81	Nar	me				
33 / EAST PURSY IFF STREET JACKSONVILLE FL 32202 83 84 City FL 85 Zip Code 41. 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 agent, or both, in the State of Florida. Such change was authorated by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME STREET ADDRESS CITY-ST.2P VALENTINE, SAMANTHA 12. ARMINGTON ROAD NORTH 12. STREET ADDRESS CITY-ST.2P VALENTINE, INGRID 22. ARME 23. STREET ADDRESS CITY-ST.2P TITLE VALENTINE, INGRID 22. ARME 23. STREET ADDRESS CITY-ST.2P ACK SONVILLE FL 32211 24. CITY-ST.2P TITLE S				91	Stre	Street Address (P.O. Roy Number is Not Accentable)				
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 Phorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P OBLETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P OBLETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P OBLETE 13. TITLE P OBLETE 13. TITLE P OBLETE 13. TITLE P OBLETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE P OBLETE 13. TITLE P OBLETE 13. TITLE P OBLETE 13. TITLE P OBLETE 13. TITLE P OBLETE 14. TITLE P OBLETE 14. CITY57.2P 14. CITY57.2P 14. CITY57.2P 15. TITLE P OBLETE 23. TITLE P OBLETE 24. TITLE P OBLETE 24. TITLE P OBLETE 25. TITLE P OBLETE 25. TITLE P OBLETE 26. CHANGE 26. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. TITLE P OBLETE 15. TITLE P OBLETE 26. CHANGE 27. WAME 28. STREET ADDRESS 29. CHY-57.2P 10. CHANGE 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY57.2P 15. CHANGE 15. TITLE P OBLETE 15. TITLE P OBLETE 16. CHANGE 16. CHANGE P OBLETE 17. TITLE P OBLETE 17. TITLE P OBLETE 18. TITLE P OBLETE 19. CHANGE 19. CHANGE P OBLETE 19. CHANGE	337 EAST FORSYTH STREET			02		eet Address (F.O. Box Number is Not Acceptable)				
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SIGNATURE Signature, 1-your or printed names of registered agent and 186 if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE	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									
12.	SIGNATURE									
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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, with all other like empowered.