1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P97000005183
4 Corporation Name	1 01 000000 100

P.B.C. FINANCIAL FOUNDATION, INC.

Principal Place of Business

Mailing Address

5841 CORPORATE WAY, STE. 106 WEST PALM BEACH FL 33407

21

5841 CORPORATE WAY, STE. 106

WEST PALM BEACH FL 33407

FILED 99 MAY -5 MIN: 28

DO NOT	WRITE	IN	THIS	SPACE

,	3.	Date	Incorporated	or Qualifed

5, Certificate of Status Desired

01/17/1997 t, FEÜNümber

APPLIED FOR

Applied For Not Applicable

> **\$8.75** Additional Fee Required

6, Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax

10. Name and Address of New Registered Agent

[.]No

SIMMONS, J.

SIGNATURE (

STREET ADDRESS

5841 CORPORATE WAY, SUITE 106

WEST PALM BEACH FL 33407

-	I. Simmon's
82	Street Address (P.O. Box Number in Maj Acceptable)
83	2770 While wing range
83	·

11. Pursuant to the provisions office or registered agent agent I am familiar with,

	Slocatore type or printed name of registerert agent and title if applicable	(NO E Re	pstere l'Agent signature re
12.	OFFICERS AND DIRECTORS		13.
TITLE	P	[_FDELETE	14 THE
NAME	SIMMONS, J		1 2 NAME
STREET ADDRESS	5841 CORPORATE WAY, STE. 106		13 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BEACH FL 33407		14 OHY-S1-ZiP
TITLE		[] DELETE	2.1 TIPLE
NAME			2.2 NAME
STREET ADDRESS			23 STREET ADDRESS
CITY-ST-ZIP			2 4 CiTY-ST-ZiP
TITLE		[] DELETE	31 TITLE
NAME			3.2 NAME
STREET ADDRESS			3 3 STREET ADDRESS
CITY-ST-ZIP			3.4 CiTY-S1-ZiP
TITLE		☐ DELETE	4 1 TITLE
NAME			4 2 NAME
STREET ADDRESS			43 STREET ADDRESS
CITY-ST-ZIP			44 CITY-ST-ZIP
TITLE		DEFELE	51 TITLE
NAME			5.2 NAME
STREET ADDRESS			53 STREET ADDRESS
CITY-ST-ZIP			54 CITY-ST-ZIP
TITLE		[] DELETE	6 1 TITLE
NAME			6.2 NAME
			6.3 STREET ADDRESS

TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES W. Palm Beach, F/33409
[1Change [] Addition

500002867875---8 -05/07/99--01118--008 \*\*\*\*750.80 \*\*\*\*150.00

> [ ] Change [ ] Addition

F1 Addition

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 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 of 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 chapter 607, or an attachment with an address, with all other like empowered.

SIGNATURE

CR2E034 (11/98)