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FILED

May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000012659 (3)

1. Corporation Name

AMERICAN FAMILY MANAGEMENT, INC.

Principal Place of Business

225 S INGRAHAM AVE  
LAKELAND FL 33801

Mailing Address

225 S INGRAHAM AVE  
LAKELAND FL 33801



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1997

4. FEI Number

☒ 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

2. Principal Place of Business

21 101 West Main St.

Suite, Apt. #, etc.

22 170

City & State

23 Lakeland FL

Zip

24 33815

Country

25 USA

2a. Mailing Address

26 P.O. Box 393

Suite, Apt. #, etc.

27

City & State

28 Lakeland FL

Zip

29 33802

Country

30 USA

9. Name and Address of Current Registered Agent

SANOBA, GREGORY A  
101 W MAIN STREET  
SUITE 160B  
LAKELAND FL 33802

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 D  
NAME MARTI, GREGORY W  
STREET ADDRESS 225 S INGRAHAM AVE  
CITY-ST-ZIP LAKELAND FL 33801 ☒ DELETE

TITLE D  
NAME MARTI, DONNA  
STREET ADDRESS 225 S INGRAHAM AVE  
CITY-ST-ZIP LAKELAND FL 33801 ☒ DELETE

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P.O.  
1.2 NAME Gregory A. Sanoba  
1.3 STREET ADDRESS 101 W. Main St., #170  
1.4 CITY-ST-ZIP Lakeland FL 33815 ☐ Change ☒ Addition

2.1 TITLE ~~Donna Marti~~ V.P.  
2.2 NAME Joshua Marti  
2.3 STREET ADDRESS 12378 Diogenes Ct.  
2.4 CITY-ST-ZIP Orlando, FL ☐ Change ☒ Addition

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS

6.1 TITLE ☐ Change ☐ Addition  
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 incorporator 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

President

4-21-98

CR2E034 (10/97)