

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000057593 (0)

1. Corporation Name

TRUST CONSULTING CORPORATION

Principal Place of Business

2103 N.W. 60TH CIRCLE
BOCA RATON FL 33496

Mailing Address

2103 N.W. 60TH CIRCLE
BOCA RATON FL 33496



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1997

2. Principal Place of Business

21 3 Marsh Haven Lane

Suite, Apt. #, etc.

22

City & State
SAVANNAH, GA

Zip
31411

Country
USA

2a. Mailing Address

26 3 Marsh HAVEN Lane

Suite, Apt. #, etc.

27

City & State
SAVANNAH, GA

Zip
31411

Country
USA

4. FEI Number

65-077 2714

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

TRUST, FREDERICK E
2103 N.W. 60TH CIRCLE
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81 Name ~~Trust, Frederick E.~~ Kenneth Gurney
82 Street Address (P.O. Box Number is Not Acceptable)
~~3 Marsh Haven Lane~~
6077 Glendale Drive
83
84 City Boca Raton FL 85 Zip Code 33483

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 Kenneth Gurney

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

(NOTE: Registered Agent signature required when reinstating)

DATE

10/15/98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME TRUST, FREDERICK E
STREET ADDRESS 2103 N.W. 60TH CIRCLE
CITY-ST-ZIP BOCA RATON FL 33496

TITLE D ☐ DELETE

NAME TRUST, EMILY
STREET ADDRESS 2103 N.W. 60TH CIRCLE
CITY-ST-ZIP BOCA RATON FL 33496

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 ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

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 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: Fred Trust REQUIRED

2/22/98

912-598-9499

CR2E034 (10/97)