PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700092326

BG FINANCIAL CONSULTANTS, INC.

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90141 009 ***150.00



| Principal Place of Business Mailing Address | | | | 118 18118 HODG | | |
|---|--|-------------------|--|--|----------------------------|-----------------------------------|
| 1001 3RD AVENUE WEST 1001 3RD AVENUE WEST SUITE 300 SUITE 300 BRADENTON FL 34205 BRADENTON FL 34205 | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed | | |
| | · | | | 10/24/1997 | | |
| Principal Place of Business | ncipal Place of Business 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | 26 | | | 65-07885.15 | 607 | Not Applicable 5 Additional |
| Suite, Apt. #, etc. | Suite, Apt. #. etc | | 5. Certificate of Status Desired | Fee | e Required | |
| City & State | City & State | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be- Added to Fees | | | |
| Z _I p Country | Zip Country | | | 8. This corporation owes the current year Intangible | | |
| 24 25 | 29 30 | | | Personal Property Tax. | | |
| 9. Name and Address of Current | Registered Agent | | - - | 10. Name and Address of New Register | d Agent | |
| BURNETT, C. RAY III 1001 3RD AVENUE WEST SUITE 300 BRADENTON FL 34205 | | 8 | 1 Name | | | 1 |
| | | 8: | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| | | 8 | 3 | , <u>,</u> | | |
| | | 8 | | | L | Zıp Code |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-name office or registered agent, or both, in the State of Florida, Such change was authorized by the coagent. I am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes | | | | poration submits this statement for the purpose on's board of directors. I hereby accept the ap | of changing cointment a | g its registered is registered |
| SIGNATURE | | , | | ed when reinstaling) DATE | | |
| Signature Typed or printed name of registered agent 12. OFFICERS AND | | 13. | ent Sidualnus tednu | ADDITIONS/CHANGES TO OFFICERS | AND DIRE | CTORS IN 12 |
| TITLE D | DELETE | 1 1 TITLE | | ADDITIONS OF WINDERS TO STATE OF THE PARTY O | Chai | |
| NAME BURNETT, C. RAY III | | 12 NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34205 | | 13 STREET ADDRESS | | | | |
| | | | | | | 1 |
| TITLE D DELETE | | | | | Cha | nge Addition |
| NAME GEISLER, KEVIN W | | 22 NAME | | | | |
| | And American Lands | | | | | |
| 1 1 | | | .\$1 · ZIP | | | ļ. |
| TITLE | [] DELETE 3 | | | | Chai | nge Addition |
| NAME | | 32 NAME | 1 | | | |
| STREET ADDRESS | | 1 | ET ADDRESS | | | - |
| CITY-ST-ZIP | | 3.4 CITY | | | | |
| TITLE | DELETE - | 4 1 1111 | | | [] Cha | nge Addition |
| NAME | | 1, 2 NAM | E | | | |
| STREET ADDRESS | | 43 STRE | ET ADDRESS | | | İ |
| CITY-ST-ZIP | | 4.4 CITY- | | | | |
| TIFLE | ☐ DELETE | 5 I TITLE | | | ☐ Chai | nge Addition |
| NAME . | | 5.2 NAME | | | | |
| STREET ADDRESS | | 53STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | 5.4 CITY- | ST-ZIP | | | |
| TITLE | ☐ DELETE | 6 1 TITLE | | | ☐ Cha | nge Addition |
| NAME | | 6.2 NAME | : | | | |
| STREET ADDRESS | | 63STRE | ET ADDRESS | | | |
| CITY-ST-ZIP | | 54 CITY - | \$T-ZIP | | | |

14. Thereby 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 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR