

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90094 036 \*\*\*150.00

DOCUMENT # P98000061573

1. Corporation Name

FIRST MADISON GROUP, INC.

Principal Place of Business

8051 NORTH TAMiami TRAIL SUITE 50  
SARASOTA FL 34243

Mailing Address

8051 NORTH TAMiami TRAIL SUITE 50  
SARASOTA FL 34243

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1998

4. FFI Number

05-0858971

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

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

☐

Yes

☒

No

2. Principal Place of Business

21 270 North Tamiami Tr.

2a. Mailing Address

26 270 North Tamiami Tr.

22 Suite, Apt. #, etc.

22 SUITE 110

27 Suite, Apt. #, etc.

27 SUITE 110

23 City & State

23 SARASOTA FL.

28 City & State

28 SARASOTA FL

24 Zip

24 34236

Country

25 SARASOTA

29 Zip

29 34236

Country

30 SARASOTA

9. Name and Address of Current Registered Agent

HARRISON, G J  
1206 MANATEE AVENUE WEST  
BRADENTON FL 34205

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 DP ☒ DELETE

NAME FRANEK, GARY M  
STREET ADDRESS 8051 NORTH TAMiami TRAIL SUITE 50  
CITY-ST-ZIP SARASOTA FL 34243

TITLE DTV ☒ DELETE

NAME SNYDER, CARMIE  
STREET ADDRESS 8051 NORTH MIAMI TRAIL SUITE 50  
CITY-ST-ZIP SARASOTA FL 34243

TITLE SDV ☒ DELETE

NAME HUDGINS, JOE W  
STREET ADDRESS 4151 CENTER POINTE CIRCLE  
CITY-ST-ZIP SARASOTA FL 34233

TITLE DV ☒ DELETE

NAME APPEL, STANLEY  
STREET ADDRESS 270 NORTH TAMiami TRAIL  
CITY-ST-ZIP SARASOTA FL 34236

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 D.P.T. JOE W. HUDGINS

1.3 STREET ADDRESS 4151 CENTER POINTE CIR.

1.4 CITY-ST-ZIP SARASOTA FL. 34233

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME D.V. STANLEY S. APPEL

2.3 STREET ADDRESS 270 NORTH TAMiami TRAIL

2.4 CITY-ST-ZIP SARASOTA FL. 34236

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME D.S. EUNICE D. HUDGINS

3.3 STREET ADDRESS 4151 CENTER POINTE CIR

3.4 CITY-ST-ZIP SARASOTA FL. 34233

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-18-99

Date

941 362 7632

Daytime Phone #

CR2E034 (1/98)

0476681