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

Apr 14 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S53814 (7)WIN FINANCIAL, INC. Principal Place of Business Mailing Address 2000 ALAMEDA AVENUE 2000 ALAMEDA AVENUE SARASOTA FL 34234 SARASOTA FL 34234 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1991 28. Mailing Address 2. Principal Place of Business 4. FEI Numbe Applied For 21 26 65-0262272 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Ζıp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ΠNo 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WICK, DAVID C 2000 ALAMEDA AVE Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34234 83 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition WICK, DAVID NAME 1.2 NAME 2000 ALAMEDA AVENUE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change TITLE DELETE 2.1 TITLE Addition NAME IMLAH, KENNETH 2 2 NAME 209 MAY DRIVE STREET ADDRESS 2.3 STREET ADDRESS **BLOOMINGTON IL** 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NORD, DOUGLAS NAME 3.2 NAME STREET ADDRESS R.R. 13 BOX 344 3.3 STREET ADDRESS **BLOOMINGTON IL** 3.4. CITY-\$1-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE 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 general report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the corporation of the corporation of the project of 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 by a yettachment without a supplied 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 by a yettachment without a supplied 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 by a yettachment without a supplied 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 by a yettachment with a supplied by the project of the same legal effect as if made under oath; that I am an officer or director of the corporation of the corporatio

TITLE

STREET ADDRESS

SIGNATURE:

FILED

Change

David Wick 3-3-98 941-753 6000

Addition