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 # S68443

(8)

CLINTON FINANCIAL GROUP, INC.

FILLD						
May 11 1998 8:00am						
Secretary of State						

CH CD



Principal Place of Business Mailing Address				1 10011510 114 (115) (4(11 615)) 6(850 (11) 6(8	il Milli Aifil Difil billi gibil 1801
1895 S. PATRICK DR. 2298 VENETIA PLACE					
INDIAN HARBOR BEACH FL 32937 US		INDIALANTIC FL 32903 US		DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
				07/22/1991	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3086828	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Cib. 8 State		City & State			Fee Required
City & State		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z(p	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer			10. Name and Address of New Registe	
NL	JGENT, THOMAS F E		81 Name		
	98 VENETIA PL		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	DIALANTIC FL 32903		0,000(7)	asioss (1.0. Day 140/100) to 140/1400 place of	
			83		
			84 City		85 Zip Code
			1.1.		┝▐▃▕▏▕
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the above-named ci	orporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered
agent. I a	m familiar with and accept the obline	ations of, Section 607.0505, F	Florida Statutes.	rations board of offectors. The oby accept the	аррыниный из годинос
SIGNATURE	(1) Maning He	(UM)AN			
-10	Stignature, 3 ped or pointed name of registerior ago OFFICERS AN		DE Registered Agent signature re		
12.	D	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	NUGENT, FRANCES B		1.2 NAME		
STREET ADDRESS	2298 VENETIA PL		1.3 STREET ADDRESS		
CITY-ST-ZIP	INDIALANTIC FL		1.4 CITY-ST-ZIP		
TITLE	NADALTATIO I E	DELETE	2.1 TITLE		Change Addition
NAME	REILLY, SUSAN F		2.2 NAME		<u> </u>
STREET ADDRESS	2225 HWY A1A #701		2.3 STREET ADDRESS		
CITY-ST-ZIP	INDIAN HARBOR BCH FL		2. 4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	NUGENT, THOMAS F E		3.2 NAME		
STREET ADDRESS	2298 VENETIA PL		3.3 STREET ADDRESS		
CITY-ST-ZIP	INDIALANTIC FL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-\$T-ZIP			4.4 CITY+ST-ZIP		
TITLE		☐ DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DC LETT	5.4 CiTY-ST-ZiP		Change T Addition
TITLE		L_J DELETE	6.1 1(TLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify	64 City-St-ZiP for the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the information
Indicated	on this annual report or supplementa	al annual report is true and ac	curate and that my signs	eture shall have the same legal effect as if mad equired by Chapter 607, Florida Statutes; and t	e under oath: that I am an
Block 12 d	or Block 13 if change <mark>st, or of at</mark> attac	chment with an address.	execute this report as re	equired by Criapter 607, Florida Statutes; and t	ластну патне appears in
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CIGNAT	LIDE、 <i>しょり サローカーカ</i> ン	10/7/ ///////	rsi ar	180 6 CAT 1100 18	リノハ ノ ハノーンダートチ