

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

An

FILED
Jun 24 1998 8:00am
Secretary of State

DOCUMENT # 570910

1. Corporation Name

FIRST FLORIDA FINANCIAL LIMITED, INC

Principal Place of Business

Mailing Address

2831 RINGLING BLVD
SUITE 214 E
SARASOTA FL 34237

2. Principal Place of Business

21 SARASOTA

Suite Apt #, etc

22 City & State SAME

23 Zip Country

24 USA

9. Name and Address of Current Registered Agent

STAYS THE SAME... STEPHEN F. VOIGT P.A.
2414 BEE RIDGE RD.
NO CHANGE SARASOTA, FL 34237

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 607.0504, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(If Officer, Registered Agent, or Secretary of State, include with this filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	☒ DELETE
NAME	F ROBERT FURLONG	
STREET ADDRESS	4615 HIDDEN VIEW PL SARASOTA FL	
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		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
1.2 NAME	JOSEPH A FURLONG	
1.3 STREET ADDRESS	3883 SHADY BROOK LN	
1.4 CITY- ST- ZIP	SARASOTA FL 34243	
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 exception stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included on this annual report or supplement 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 person authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:

(Signature of Registered Agent or Secretary of State)

6-17-98

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CR2E034 (10/97)