SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/07: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

2. Principal Place of Business

CITY-ST-ZIP

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name V32341

CERWIN FINANCIAL SERVICES, INC.

(2)

2a, Mailing Address

97 JUL 25 AII II: 18 TALLAHASSEE, FLORIDA

FILED

Principal Place of Business Mailing Address 2653 MCCORMICK DRIVE CLEARWATER FL 34619 2401 PINNACLE CT. N. PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE

3a. Date of Last Report

Applied For

<u>06/13/1996</u>

3. Date Incorporated or Qualified

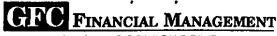
04/27/1992

4. FEI Number

21 26		26			59-3120630	Not Applicable							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional								
22		27			Certificate of Status Desired	Fee Required							
City & State City & State					6. Election Campaign Financing	\$5.00 May Be							
23 28					Trust Fund Contribution	Added to Fees							
Zip	Country	Zip	Country		8. This corporation owes or has paid the c	urrent year Intangible							
24	25	29	30		Personal Properly Tax due June 30.	Yes No							
9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	J Agent							
2401 PINNACLE CT. N. PALM HARBOR FL 34684				81 Name 82 Street Address (P.O. Box Number is Not Acceptable)									
										83			
										84	City		85 Zip Code
				•	F	L							
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	tes, the above	-named corp	votation eulomite this statement for the purpose	of aparaina ita resistarad							
agent. I a	registered agent, or both, in the State im f am lliar with, and accept the obliga	oi Fiorida. Such change was a ations of, Section 607,0505, Fi	autnorized by orida Statutes	ine corporati :.	ion's board of directors. I hereby accept the ap	pointment as registered							
SIGNATURE													
	Signature, lyped or printed name of registered age		E: Registered Age	nt signature require	ed when reinstating) DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AF	ID DIRECTORS IN 12							
TITLE	PSD	DELETE.	1.1 TITLE			Change Addition							
NAME	CERWIN, GEORGE F.JTL		1.2 NAME										
STREET ADDRESS	2401 PINNACLE CT. N.		1.3 STREET	ADDRESS									
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-S1	F- ZiP									
TITLE	VTD	DELETE	21 TITLE		500002252 -07/30/97-	25 District Charles							
NAME	CERWIN, SUE A		2.2 NAME		-07/30 <u>/9</u> 7	01066013							
STREET ADDRESS	2401 PINNACLE CT. N.		2.3 STREET	address	****165.80	****165.00							
CITY-ST-ZIP	PALM HARBOR FL		2.4 CITY - S	T - ZIP									
TITLE		DELETE	3.1 TITLE			Change Addition							
NAME.			3.2 NAME										
STREET ADDRESS			3.3 STREET	ADDRESS									
CITY-ST-ZIP			3.4. CITY-S	T-71P									
TITLE	1	DELETÉ	4.1 TITLE			☐ Change ☐ Addition							
NAME			4. 2 NAME										
STREET ADDRESS			4.3 STREET	ADDRESS									
CITY-ST-ZIP			4.4 CITY-SI										
TITLE		☐ DELETE	51 TITLE			Charge Addition							
NAME			5.2 NAME		/								
STREET ADDRESS			5.3 STREET	ADDRESS	/	\mathcal{M}							
CITY-ST-ZIP			5.4 CITY-ST		1	k k()							
TITLE		☐ DELETE	6.1 TITLE			Chapqe Addition							
NAME		_	6.2 NAME		\								
STREET ADDRESS			6.3 STREET	ADORESS		_							

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated of this annual report or supplied enter that the information indicated of this annual report or supplied enter that the information indicated of this annual report of 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 reference of true and accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, prompt attachment with an address.

6.4 CITY - ST - ZIP



2653 McCORMICK DRIVE CLEARWATER, FLORIDA 34619 813-724-9499 Ø.2

July 22, 1997

Annual Reports Filings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Document #V32341 for Cerwin Financial Services, Inc. FEI #59-3120630

To Whom It May Concern:

My corporation renewal form and the appropriate fee of \$165.00 was paid and mailed on January 3, 1997 (see enclosed form, copy of check and check stub). Obviously it got lost, somewhere. When I phoned your office today, after receiving a second request for the above, I was told to sign and return the form, send a check for the original amount \$165.00, and a copy of what I mailed in January.

Please acknowledge by sending me a written verification of my corporation renewal in good standing, to my mailing address: 2401 Pinnacle CT. N., Palm Harbor, FL 34684.

If any questions, please no not hesitate to call me. Thank you.

Sincerely.

George F. Cerwin III

President