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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V45433

(2)

ANDERSON-RAND INCOME TAX & CONDO FINANCIAL SERVI

020, 111	•						
Principal Plac	e of Businoss	Mailing Address	Mailing Address 311 N PENNSYLVANIA AVENUE SUITE 4 WINTER PARK FL 32789-3740		I HOURT DIERRE BARDE DANK DEBAR ARRED INGS	INDIN OLON BIGH DIGH BIRH DIGH DIGH 1881	
311 N PENNSY SUITE 4 WINTER PARK	'LVANIA AVENUE FL 32789-3740	SUITE 4					
					 Date Incorporated or Qualified 06/23/1992 	3a. Date of Last Report 02/08/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	r
21		26			59-3124854	✓ Not Applica	able
Suite, Apt. #, etc.		Suite, Apt #, etc.			6. Certificate of Status Desired	\$8.75 Additiona Fee Required	1
City & Stat	в	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation has liability for in	tangible tax under s. 199.032	2.
24	25 29 30		30	Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent			10. Name end Address of New Reg	stered Agent	
AND	ERSON, RICHARD		81	Name			
311	N PENNSYLVANIA AVE		82	Street Addr	ess (P.O. Box Number is Not Acceptab	o)	
AAMA	TER PARK FL 32789		83		7 (First)		
			84	City		FL 85 Zip Code	-
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida State of Florida, Such change was lations of, Section 607.0505, I	utes, the above s authorized by Florida Statutes	named corp the corporati	oration submits this statement for the prion's board of directors. I hereby accep		red od
SIGNATURE							
<u> </u>	Signature, typed or printed name of registered ag			nt signature requir	ed when reinstating)	DATE	
12.		ID DIRECTORS DELETE	13.	k/ -	ADDITIONS/CHANGES TO OFFIC	Change Add	19:00
TITLE	PS	בן טנטונ	1.1 TITLE	V		Dig Change □ Aud	поп
NAME	MORRISON, PAULETTE J		1.2 NAMF				
STREET ADDRESS	5429 BROOKWOOD WAY		1.3 STREFT				ļ
CITY-ST-ZIP	ORLANDO FL 32789	NOTICE IT	1.4 CITY- S	T-ZIP		Change DAde	
TITLE	V	DELETE	2.1 THUE			Change Add	itton
NAME	COTTREUL, FAYE K		2.2 NAME				
STREET ADDRESS	311 N PENNSYLVANIA AVE		23 STREET	ì			
CITY-ST-ZIP	WINTER PARK FL 32789	T bevere	2.4 CHY-5	51 - ZIP		N 0	Color
TITLE	PS A ROSE	☐ DELETE	3.1 TITLE			Change Add	illon i
NAME	RICHARD ANDERSON 311 N PERNSYLVANIA WILTER PARK, 713	-Suite 4	3.2 NAME	ļ			
STREET ADDRESS	11 3 112	204	3.3 STREET				
CITY-ST-ZIP	WILLER PARK, 1()	DELETE	3.4 CITY-S	51 - 21P		Change Add	lition
TITLE		ORCCIE	4.1 31TLE	1		☐ Change ☐ Auu	RIDIT
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	i			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		Change 1444	(ition
TITLE			5.1 TITLE			Change Add	nt(dl)
NAME	-		5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		Dries.	5 4 DITY - S	1 · 2(P			
TITLE	}	☐ DELETE	6.1 HILE	}		Change Add	เมอม
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 \$1REE1	ADDRESS			

6.4 CITY-ST-ZIP

I do 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 eath; 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.

SIGNATURE