

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90161 043 ***150.00

DOCUMENT # P41140

1. Corporation Name

FIRST ASSOCIATED SECURITIES GROUP, INC.

Principal Place of Business

430 BROADWAY
CHICO CA 95928

Mailing Address

430 BROADWAY
CHICO CA 95928

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1992

4. FEI Number

68-0130316

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

HICKS, JEAN
3341 62ND AVE N
ST PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

KIM HALLIBURTON

82 Street Address (P.O. Box Number is Not Acceptable)

26750 US HWY 19 N., Suite 104

83

84 City

Clearwater

FL

85 Zip Code

33761

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

Kim Halliburton

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/13/98

12. OFFICERS AND DIRECTORS

TITLE PT ☒ DELETE

NAME MARTELLARO, CARL
STREET ADDRESS 430 BROADWAY
CITY-ST-ZIP CHICO CA 95928

TITLE S ☐ DELETE

NAME WOLKOFF, TERRY
STREET ADDRESS 430 BROADWAY
CITY-ST-ZIP CHICO CA

TITLE CFO ☒ DELETE

NAME ROSS, JO ANN
STREET ADDRESS 430 BROADWAY
CITY-ST-ZIP CHICO CA 95929

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 PT ☐ Change ☒ Addition

12 NAME MARTELLARO, ANTHONY
13 STREET ADDRESS 430 BROADWAY
14 CITY-ST-ZIP CHICO, CA 95928

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE CFO ☐ Change ☒ Addition

3.2 NAME HALLIBURTON, KIM
3.3 STREET ADDRESS 26750 US HWY 19 N, Suite 104
3.4 CITY-ST-ZIP Clearwater, FL 33761

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 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 oath; 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, with all other like empowered.

SIGNATURE:

Kim Halliburton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/1/99

530 343 8830

CR2E034 (11/98)

05600396