

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000000017

1. Entity Name
O'HAIRE, QUINN, CANDLER & CASALINO, CHARTERED



Principal Place of Business
3111 CARDINAL DRIVE
VERO BEACH, FL 32963

Mailing Address
PO BOX 4375
VERO BEACH, FL 32964



03152005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0549320

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CANDLER, RICHARD B
3111 CARDINAL DR
VERO BEACH, FL 32963

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000314958
04/19/05-80014-021 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
O'HAIRE, MICHAEL
575 HWY A-1-A
VERO BEACH, FL 32963

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
QUINN, JEROME D
308 LIVE OAK RD
VERO BEACH, FL 32963

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
CANDLER, RICHARD B
595 HWY A1A
VERO BEACH, FL 32963

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
CASALINO, GREGG M
950 WINDSONG WAY
VERO BEACH, FL 32963

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-05

Date

772-231-6900

Daytime Phone #