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Feb 25 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000074421 (4)

1. Corporation Name
O'NEILL MANAGEMENT SERVICES, INC.



Principal Place of Business
2508 TARKILN OAKS DRIVE
PENASCOLA FL 32506

Mailing Address
2508 TARKILN OAKS DRIVE
PENASCOLA FL 32506-8134

3. Date Incorporated or Qualified
09/04/1996

3a. Date of Last Report

2. Principal Place of Business
21 17290 PERDIPO KEY DR
22 2 B
23 PENASCOLA FL
24 32507 25 ESCAMBIA

2a. Mailing Address
26 17290 PERDIPO KEY DR
27 2 B
28 PENASCOLA FL
29 32507 30 ESCAMBIA

4. FEI Number
59-3407899

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

O'NEILL, FRANK R
2508 TARKILN OAKS DRIVE
PENASCOLA FL 32506

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1908, 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE: *Frank R. O'Neill* FRANK R. O'NEILL, PRESIDENT DATE: FEB 3, 1997

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
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4.4 CITY-ST-ZIP
5.1 TITLE
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6.1 TITLE
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6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
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5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE: *Frank R. O'Neill* FRANK R. O'NEILL, PRESIDENT DATE: FEB 3, 1997

CR2E034 (9/96)