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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S96302

(2)

FILED Apr 27 1998 8:00am Secretary of State

THE HADLEY GROUP, INC.					
	**************************************			1 JOANNEYS IJO HAIRE MINH DONO JIBI AIRIE A	HARA BURUL BURUL BURUL AHRAY (DA)
Principal Plac	ce of Business	Mailing Address		(100/12/2 (10 1819 Stiff filtt basin 1101 ålen 4	LOIN ESEAL ALBIN ANNIN BINCE LAGE
5309 72ND ST E PO BOX 20745					
BRADENTON FL 34203 US		BRADENTON FL 34203 US		DO NOT WRITE IN TH	IS SPACE
00		03		3. Date Incorporated or Qualified	
1				11/22/1991	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0300564	Not Applicable
I SUITE. ADI	#, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27	<u></u>		Fee Required
City & Ste	18	City & State		Election Campaign Financing	\$5.00 May Be
23	Country	28 7:rs	Country	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	9. Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registere	
- 4/			81 Name	10. 10.10.10.10.10.10.10.10.10.10.10.10.10.1	
	NDLEY, ROBERT				
4024 72ND AVENUE EAST SARASOTA FL 34243			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	WASOTA FL 34243		83		
Ì					
ł			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes					
office or	registered agent, or both, in the Statem familiar with, and accept the oblid	e of Florida, Such change was a	uthorized by the corpora	tion's board of directors. I hereby accept the a	ppointment as registered
F	arrianmar with, and accept the obii	gallons of, decitor our costs, the	ijoa Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	pent and bite if applicable. (NOTE	Registered Agent signature regul	red when reinstaling) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PSD	☐ DELETE	1.1 TITLE		Change Addition
NAME	HADLEY, ROBERT V.		4.0.114445		•
STREET ADDRESS	4024 72ND AVENUE EAST		1.2 NAME		
	******		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	V	DELETE	1.3 STREET ADDRESS 1.4 CITY+ST-ZIP 2.1 TITLE		Change Addition
TITLE NAME	V HADLEY, MARGARET M.	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		Change Addition
TITLE NAME STREET ADDRESS	V HADLEY, MARGARET M. 4024 72ND AVENUE EAST	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 MAME 2.3 STREET ADDRESS		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	V HADLEY, MARGARET M. 4024 72ND AVENUE EAST	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 MAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	V HADLEY, MARGARET M. 4024 72ND AVENUE EAST		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 MAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	V HADLEY, MARGARET M. 4024 72ND AVENUE EAST		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		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HADLEY, MARGARET M. 4024 72ND AVENUE EAST	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 MAME 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 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition Change Addition Change Addition
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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.

4-21-98 941-751-1519