

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # J51129

(1)

95 MAY -1 11:10:32

1. Corporation Name

CHRISTOPHER C. CLONEY, P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address

315 S.E. 7TH ST.
FT. LAUDERDALE FL 33301

3. Mailing Address

315 S.E. 7TH ST.
FT. LAUDERDALE FL 33301

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified
01/09/1987

3a. Date of Last Report
06/14/1994

4. FID Number
59-2766577

Applied For
Not Applicable

5. Certificate of Status Entered

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Does corporation have authority to solicit public funds under the
Florida Statutes? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SKIPPER, MARK J ESQ
315 S.E. 7TH ST.
SUITE 200
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Numbers Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. I, the undersigned, the person or persons authorized to file this report on behalf of the corporation, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the same have been authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation.

SIGNATURE

DATE

FILE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL INFORMATION TO OFFICERS AND DIRECTORS

NAME	CLONEY, CHRISTOPHER C.
ADDRESS	315 S.E. 7TH ST.
CITY	FT. LAUDERDALE FL
STATE	
ZIP CODE	
DATE	
NAME	
ADDRESS	
CITY	
STATE	
ZIP CODE	
DATE	
NAME	
ADDRESS	
CITY	
STATE	
ZIP CODE	
DATE	
NAME	
ADDRESS	
CITY	
STATE	
ZIP CODE	
DATE	

1. NAME		2. ADDRESS	
3. CITY		4. STATE	
5. ZIP CODE		6. DATE	
7. NAME		8. ADDRESS	
9. CITY		10. STATE	
11. ZIP CODE		12. DATE	
13. NAME		14. ADDRESS	
15. CITY		16. STATE	
17. ZIP CODE		18. DATE	
19. NAME		20. ADDRESS	
21. CITY		22. STATE	
23. ZIP CODE		24. DATE	
25. NAME		26. ADDRESS	
27. CITY		28. STATE	
29. ZIP CODE		30. DATE	

14. I, the undersigned, hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the same have been authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation.

SIGNATURE:

Christopher C. Cloney

CHRISTOPHER C. CLONEY 4/27/95

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