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PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # 441919



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 16, 1999 8:00 am Secretary of State Katherine Harris

04-16-1999 90011 008 ***150.00



1. Corporation Name DELAHANTY AND ASSOCIATES	, INC.	
Principal Place of Business	Mailing Address	

1560 LE JEUNE ROAD MIAMI FL 33134

228 S OCEAN SHORES DR KEY LARGO FL 33037

	US	DO NOT WRITE IN THIS SPACE		
		3. Date Incorporated or Qualified 12/14/1973		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For		
21	26	59-1502504 Not Applicable		
Suite, Apt. #. etc	Suite, Apt. #, etc.	5. Certificate of Status Desired		
City & State	City & State	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country	Zip Country	8. This corporation owes the current year Intangible Personal Property Tax.		
9. Name and Address of C	urrent Registered Agent	10. Name and Address of New Registered Agent		

DELAHANTY, HOWARD J. 2228 SOUTH OCEAN SHORES DRIVE KEY LARGO FL 33037

	10. Name and Address of New Registered Agent							
81	Name							
82	Street Address (P.O. Box Number is Not Acceptable)							
83								
84	City FL 85 Zip Code							

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Reg	istered Agent signature re	required when reinstating) DATE	ľ			
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD D	ELETE	1.1 TITLE	☐ Change ☐ Additi	.on			
NAME	DELAHANTY (HOWARD J.)		1.2 NAME					
STREET ADDRESS	228 SOUTH OCEAN SHORES DR.		1.3 STREET ADDRESS	s	ĺ			
CITY-ST-ZIP	KEY LARGO FL		1.4 CITY-ST-ZIP					
TITLE	VD	ELETE	2.1 TITLE	☐ Change ☐ Additi	ion			
NAME	DELAHANTY (LINDE M.)		2.2 NAME		(
STREET ADDRESS	228 SOUTH OCAEN SHORES DR.		2.3 STREET ADDRESS	S	نسته			
- CITY-ST-ZIP-	-KEY-LARGO-FL		2.4 CITY-ST-ZIP					
TITLE	D	ELETE	3.1 TITLE	☐ Change ☐ Addit	ion			
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TITLE		ELETE	6.1 TITLE	☐ Change ☐ Additi	ion			
NAME			6.2 NAME		-			
STREET ADDRESS			6.3 STREET ADDRESS	s	- }			
CITY-ST-ZIP	. '		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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE