COF ANNI	PROFICE: CORPORATION WILL EDN OR BEFORE 8/1/96: \$225 (IF DEPROPERTY NEEDS OF THE PROPERTY NEEDS OF THE PROPERT	FLORIDA I Sa Sa	FTER AUGUST 7, 1996. NT DUE TO REINSTATE: \$375.) DEPARTMENT OF STATE undra B. Mortham ecretary of State N OF CORPORATIONS		
1. Corporation	MENT # 15673  T. HURLEY ASSOCIATES	(.)	ŀ		
2506 PASS-A	ce of Business	Mailing Address 2506 PASS-A-GRIL		1 100131 (1061 81116 811(1 1864 111)6	ann asar duan anus anak asak bidir bidir 1804
SI PETERSE	BURG BEACH FL 33706	ST PETERSBURG	BEACH FL 33706	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal P	Place of Business	2a. Mailing Address	s	12/22/1948 4. FEI Number	06/12/1995 Applied For
Suite Apt.	# etc	26 Suite, Apt #, et		59-0596660	Not Applicable
22	,	27 Suite, Apt. #, et	G. 	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip 24	Country 25	Zıp	Country	8. This corporation has hability for	
24	9. Name and Address of Curre	29 ent Registered Agent	30	Florida Statutes  10. Name and Address of New R	Yes No egistered Agent
HURLEY, FRANK T JR 2808 SUNSET WAY  81 Name 82 Stool Ad					
ST PETERSBURG BEACH FL 33706				dress (P.O. Box Number is Not Accepta	ble)
			<b>B3</b>		
			84 City		FL 85 Zip Code
				poration submits this statement for the patients board of directors. I hereby acception's	ourpose of changing its registered of the appointment as registered
ageni. i a SIGNATURE	in familiar with, and accept the obli	gations of, Section 607.050	5, Flor.da Statutes	, i	
12.	Signature: Typed or printed name of registered a OFFICERS A	gent and title if applicable ND DIRECTORS	(NOTE: Respected Agent signature req	uired when reinstating! ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	PD COMMET ID	DELET		Applitoria/orialidada 10 ori 1	CERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	HURLEY, FRANK T., JR. 2808 SUNSET WAY		1.2 NAME 1.3 STREET ADDRESS		24
CITY - ST - ZIP	ST PETE BEACH FL		14 CHY-ST-ZIP		
TITLE NAME	vtd Hurley, J. Kenneth	DELET	· ·		Change Addition
STREET ADDRESS	2122 W. VINA DEL MAR		2 2 NAME 2 3 STREET ADORESS		
CITY - ST - ZIP	ST. PETE FL		2 4 CITY - ST - ZIP		
TITLE NAME		L DELET			Change Addition
STREET ADDRESS			32 NAME 33 STREET ADDRESS		
CITY-ST-ZIP			34 CiTY-ST-ZIP		
TITLE NAME		L DELET			Criange Addition
STAGET ADDRESS			4 2 NAME 4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - 7IP		
TITLE NAME		DELET			Change Addition
STREET ADDRESS			5 2 NAME 5 3 STREET AODRESS		
CITY-ST-ZIP			5 4 CITY - ST- ZIP		
TITLE NAME		DELET			Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTY - ST - ZIP		
			ily furnished and does not qua	alify for the exemption stated in Section and accurate and that my signature sha	
	ler oath, that I am an officer or direction ame appears in Block 12 or Block 13			and accurate and that my signature shall be to execute this report as required by the	Chapter 617, Florida Statutes, and
SIGNATI	URE:	6 4-1. Co.	1	An an in 1007	
		PRINTED NAME OF SIGNING OF	FICER OR DIRECTOR	June 13 1646	Day true France 8