


OND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 07, 1999 8:00 am
Secretary of State
09-07-1999 90010 030 ***550.00

OCUMENT # 177649
Corporation Name
KILLARNEY CORPORATION, INC.



Principal Place of Business	Mailing Address
KILLARNEY DR BOX 2025 WINTER PARK FL 32789	P O BOX 2025 PO BOX 2025 WINTER PARK FL 32790-2025 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	03/05/1954
4. FEI Number	59-0713615
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Principal Place of Business	2a. Mailing Address
26	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
27	27
City & State	City & State
28	28
Zip	Country
25	29
Zip	Country
30	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BESKE, ROBERT 1791 KILLARNEY DRIVE WINTER PARK FL 32789	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
ET ADDRESS	P BESKE, ROBERT S 1791 KILLARNEY DR. WINTER PARK FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		1.2 NAME			
		1.3 STREET ADDRESS			
		1.4 CITY-ST-ZIP			
ET ADDRESS	T DOWNEY, JESSIE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP	102 ESSEX CT LONGWOOD FL	2.2 NAME			
		2.3 STREET ADDRESS			
		2.4 CITY-ST-ZIP			
ET ADDRESS		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		3.2 NAME			
		3.3 STREET ADDRESS			
		3.4 CITY-ST-ZIP			
ET ADDRESS		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		4.2 NAME			
		4.3 STREET ADDRESS			
		4.4 CITY-ST-ZIP			
ET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		5.2 NAME			
		5.3 STREET ADDRESS			
		5.4 CITY-ST-ZIP			
ET ADDRESS		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		6.2 NAME			
		6.3 STREET ADDRESS			
		6.4 CITY-ST-ZIP			

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.

GNATURE:  9/3/99 407-645-2710

CR2E034 (5/99)