

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 26 AM 9:06

DOCUMENT # 289525

(8)

1. Corporation Name

ADAIR & BRADY, INCORPORATED

Principal Place of Business

1958 SOUTH CONGRESS AVENUE
WEST PALM BEACH FL 33406

Mailing Address

1958 SOUTH CONGRESS AVENUE
WEST PALM BEACH FL 33406

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1965

3a. Date of Last Report

06/27/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-1086656

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ADAIR, JOHN JR.,
1958 S CONGRESS AVE
WEST PALM BEACH FL

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: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ADAIR, JOHN, JR
STREET ADDRESS 1550 GLEN RD
CITY - ST - ZIP W PALM BCH, FL 00000

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VST
NAME ST CHARLES, DENNIS
STREET ADDRESS 2600 125TH STREET
CITY - ST - ZIP LAKE PARK FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

NO LONGER AN EMPLOYEE
OR OFFICER

TITLE VD
NAME STARKEY, LELAND
STREET ADDRESS 11214 MARJORAM DR
CITY - ST - ZIP PALM BCH GARDENS FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

NO LONGER AN EMPLOYEE
OR OFFICER

TITLE VD
NAME O'LAUGHLIN, DOUGLAS
STREET ADDRESS 14565 KING TERRACE
CITY - ST - ZIP WEST PALM BEACH FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME PAINTER, DENNIS
STREET ADDRESS 6099 HIGH RIDGE ROAD
CITY - ST - ZIP LANTANA FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(e), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/95 407-964-1221