FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90104 011 ***150.00

DOCUMENT # 334197 1. Corporation Name

ALLMON, TIERNAN & ELY, INC

ALLINON	, HERMAN & ELT, MO									
Principal Place of Business Mailing Address							וגם יוקוס וספר וגוסר חובור נספנס וווגר במגוו מסוקטג ו	DE BIBRI D	וספו נופנס ווטוס זופו	
1177 GEORGE BUSH BLVD #101 1177 GEORGE BUSH BLVD #10 DELRAY BCH FL 33483 DELRAY BCH FL 33483				#101	1		DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified 08/23/1968			
2. Principal Pl	ace of Business	2a. Maili	ng Address				4. FEI Number		Applied For	
1		26					59-1222302	[_	Not Applicable	
Suite, Apt. #, etc Suite, Apt. #			, Apt. #, etc.				5. Certificate of Status Desired	-	5 Additional	
1		27					J. 001110310 01 010110 0	Fee	e Required	
City & State	9	City	& State				6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees	
Żip	Country	Zip		Coun	itry		8. This corporation owes the current year Inta	ngjole		
25 29 30			30		Personal Property Tax.			☑Yes ☐No		
' - <u>-</u>	9. Name and Address of Curre	ent Registered	Agent				gent	int		
					81	Name				
	NAN, W SCOTT			١,	82	Stroot Ad	Idress (P.O. Box Number is Not Acceptable)			
1177	GEORGE BUSH BLVD #101			'	2	Street Au	idless (F.O. Box Number is Not Acceptable)			
· Deli	RAY BCH FL 33483			1	83					
				-				T==T -	7:0-7-	
**				1	84	City	· FL	85	Zip Code	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	an Finnida Su	ch change was au	thorized l	hu t	-named co the corpora	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoin	hanging tment a	j its registered s registered	
	Signature, typed or printed name of registered a			Registered A	gent	signature requ	uired when reinstating) DATE			
		ND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AN			
	C		□ DELETE	1.1 TITL	Æ	ì		[Char	nge Addition	
	allmon, donald			1.2 NAV	ΛE					
··· I AUNTALISIS	1177 GEORGE BUSH BV #16	01		1.3 STR	EET	ADDRESS	33483		/	
ST ZIP	DELRAY BCH, FL 00000			1.4 CITY	1-S	ZIP	37707	_/_		
	P		DELETE	2.1 TITL	Ε `			Char	nge Addition	
	TIERNAN, W SCOTT			2.2 NAM	Æ					
···(AL/ORLSS	AATT OF OBOT BUOULDING MA	•		2.3 STR	2.3 STREET ADDRESS		-1/02			
. ST-ZIP	The state of the s		2.4 CIT	2.4 CITY-S -ZIP		ラクイ のフ		<u> </u>		
	V		DELETE	3.1 TITL	E			Char	nge Addition	
Ì	ELY, RANDOLPH T			3.2 NAM	Æ	}				
.: AUDRESS		01		3.3 STR	EET.	ADDRESS	22102			
ST ZIP	DELRAY BCH FL			3.4. CIT	Y-5	ZIP	33483			
<u> </u>	SEEWII COIIIE		☐ DELETE	4.1 TITL	-			☐ Char	nge Addition	
l				4.2 NA	ME					

ST-ZIP

64 CITY-ST-ZIP

1 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, with all other like empowered.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

□ DELETE

DELETE

	_		_	_		_	_	
-	-		-	т		R		٠
	- 1	•	_		u	т.	•	

LACKDERS

ST ZIP

__ I ADORESS

I ADDRESS

ST-ZIP

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Change

Change

CR2E034 (11/98)

Addition

☐ Addition