

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

FILED  
Mar 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 343128 (5)

1. Corporation Name  
DICK HOLLAHAN AND ASSOCIATES, INC.

Principal Place of Business RT 3 BOX 2812 QUINCY FL 32351 US	Mailing Address RT 3 BOX 2812 QUINCY FL 32351 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/21/1969	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1404307	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HOLLAHAN, DICK  
RT 3 BOX 2812  
QUINCY FL 32351

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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
STREET ADDRESS	RT 3 BOX 2812	1.2 NAME	
CITY-ST-ZIP	QUINCY FL	1.3 STREET ADDRESS	
TITLE	NAME	1.4 CITY-ST-ZIP	Change Addition
STREET ADDRESS	ST ALLEN, JOYCE LEE	2.1 TITLE	
CITY-ST-ZIP	RT 3 BOX 2812	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS	Change Addition
STREET ADDRESS	QUINCY FL	2.4 CITY-ST-ZIP	
CITY-ST-ZIP		3.1 TITLE	Change Addition
TITLE	NAME	3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Change Addition
TITLE	NAME	4.1 TITLE	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	Change Addition
TITLE	NAME	4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	Change Addition
CITY-ST-ZIP		5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	Change Addition
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	Change Addition
TITLE	NAME	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Change Addition

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, or 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:

*Dick Hollahan*  
DICK HOLLAHAN

2/28/98 (850) 627-9622

CR2E034 (10/97)