FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **397987** **(9)**

1. Corporation Name

DAILEY-FOTORNY, INC

Principal Place of Business

5050 10TH AVENUE NO., SUITE B
LAKE WORTH FL 33463

Mailing Address

5050 10TH AVENUE NO., SUITE B
LAKE WORTH FL 33463

3. Date Incorporated or Qualified: **03/23/1972**

3a. Date of Last Report: **02/01/1995**

4. FEI Number: **59-1395216** ☐ 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

2. Principal Place of Business

21
22 Suite, Apt. #, etc.: SUITE A
23 City & State:
24 Zip | 25 Country

2a. Mailing Address

26
27 Suite, Apt. #, etc.: SUITE A
28 City & State:
29 Zip | 30 Country

9. Name and Address of Current Registered Agent

FOTORNY, PAUL J.
5050 10TH AVENUE NO., SUITE B
LAKE WORTH FL 33463

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 607.0505 and 607.1005, 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 _____ DATE _____

12. OFFICERS AND/OR DIRECTORS

Title	ST	☐ DELETE
Name	FOTORNY, KIMBERLEY C.	
Street Address	5050 10TH AVE., N, STE B	
City-State-Zip	LAKE WORTH FL	
Title	PD	☐ DELETE
Name	FOTORNY, PAUL	
Street Address	5050 10TH AVE NO. STE B	
City-State-Zip	LAKE WORTH FL	
Title		☐ DELETE
Name		
Street Address		
City-State-Zip		
Title		☐ DELETE
Name		
Street Address		
City-State-Zip		
Title		☐ DELETE
Name		
Street Address		
City-State-Zip		
Title		☐ DELETE
Name		
Street Address		
City-State-Zip		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

51 Title		☐ Change ☐ Addition
52 Name		
53 Street Address	SUITE A	
54 City-St-Zip		
61 Title		☐ Change ☐ Addition
62 Name		
63 Street Address	SUITE A	
64 City-St-Zip		
71 Title		☐ Change ☐ Addition
72 Name		
73 Street Address		
74 City-St-Zip		
81 Title		☐ Change ☐ Addition
82 Name		
83 Street Address		
84 City-St-Zip		
91 Title		☐ Change ☐ Addition
92 Name		
93 Street Address		
94 City-St-Zip		
101 Title		☐ Change ☐ Addition
102 Name		
103 Street Address		
104 City-St-Zip		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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 added to an attachment with an address.

SIGNATURE: Kimberley C. Fotorny KIMBERLEY C. FOTORNY 2/12/96 407/965-8787
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone

CR2E034 (12/95)