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

OCUMENT # 504216

DAY & ASSOCIATES, INC.

rincipal Place of Business

· · · S E 17TH TERRACE

Mailing Address

1213 S E 17TH TERRACE

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90061 039 ***155.00



COUNT LE 20220	CAPE COUNT IT 30330		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualifed		
			05/24/1976		
rincipal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
525 FIRST STREET. ARTI-1.	26 2525 FIRST STREET	; %27-1,313	59-1672515	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional		
APT. 1613	27 APT, 1613		5. Certicate of Status Desired	Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
FORT MYERS, FL	28 FORT MYERS, FL		Trust Fund Contribution	Added to Fees	
ip Country	Zip Cou	ntry	8. This corporation owes the current year	Intangible	
3901-2453 25 U.S.A.	29 33901-2453 30 U	.S.A.	Personal Property Tax.	XYes □ No	
9. Name and Address of Curre	10. Name and Address of New Registered Agent				
DAY FRANK T		81 Name DAY	, FRANK T.		
1213 S E 17TH TERRACE		82 Street Addre 252	2 Street Address (P.O. Box Number is Not Acceptable) 2525 FIRST STREET		
CAPE CORAL FL 33990	·	83 APT	1613		
		84 City FOR	T MYERS	85 Zip Code 33901	

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, typed or printed name of registered agent and title	if applicable (NOTE: Re	egistered Agent signature re	required when reinstating) DATE
OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	VSD	DELETE	1.1 TITLE	VSD X Change □ Addit
1	DAY, AGNES J		1.2 NAME	DAY, AGNES J.
_I ADDRESS	1213 S E 17TH TERRACE		1.3 STREET ADDRESS	2525 FIRST STREET, APT. 1613
ST ZIP	CAPE CORAL, FL 0		1.4 CITY-ST-ZIP	FORT MYERS, FL 33901-2453
	PTD	X DELETE	2.1 TITLE	PTD X Change ☐ Addit
	DAY, FRANK T		2.2 NAME	DAY, FRANK T.
_ ADDRESS	1213 S E 17TH TERRACE		2.3 STREET ADDRESS	2525 FIRST STREET, APT. 1613
ST ZIP	CAPE CORAL, FL 0		2.4 CITY-ST-ZIP	FORT MYERS, F: 33901-2453
		☐ DELETE	3.1 TITLE	☐ Change ☐ Addit
.]			32 NAME	
1 M 1 M 1 33			3.3 STREET ADDRESS	
ST-ZIP			3.4. CITY-ST-ZIP	
		☐ DELETE	4.1 TITLE	☐ Change ☐ Addit
			4 2 NAME	
I ADDAESS			4.3 STREET ADDRESS	,
ST ZIP			4.4 CITY-ST-ZIP	
Ì		□ DELETE	5.1 TITLE	☐ Change ☐ Addit
1			5.2 NAME	
LADDRESS			5.3 STREET ADDRESS	
ST ZIP			5.4 CITY-ST-ZIP	
		☐ DELETE	6.1 TITLE	☐ Change ☐ Addit
			6.2 NAME	
1 ADDRESS			6.3 STREET ADDRESS	
ST-ZIP			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, with all other like empowered.

PRESIDENT 1/4/99 941-334-4198