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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						F F	ILE)	D	
	PROFIT FLORIDA DEPAR			\$TA1	ſΈ	$\begin{bmatrix} \lambda & nr & 0 & 0 \end{bmatrix}$	000	9.6	1000
	RPORATION UAL REPORT		Sandra B. Mortham			Apr 09 1	990	0.0	<i>M</i> an
	100	Secretary		ONO		Secretary of State			
1998 DIVISION OF CORF				Tronations			пус	<i>)</i> 1 ()	tate
	MENT # 577566	6 (3)							
N & N	ASSOCIATES, INC.	(ويلم	62	100)] 	A(A) ANANY ALANA	1 1611 31811 818	184 818 14 1 88 1
Principal Plac	e of Business	Mailing Address	<u> </u>	(1 `	30/				III ELEM IOEI
1789 DESOTO ROAD P O BOX 3042									•
SARASOTA FL 34234 SARASOTA FL 34230						DO NOT HIDITE IN THE COLOR			
US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						06/30/1978			
	Place of Business	2a. Mailing Address				4. FEI Number			pplied For
Sulte, Apt.	pt. #, etc. Suite, Apt. #, etc.					59-1847178			ot Applicable Additional
22	27					5. Certificate of Status Desired		•	equired
City & Stat	& State City & State					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country Zip			y		8. This corporation owes or has p			
24	25		30			Personal Property Tax due Jun	e 30.	Yes [□No
DIA	9. Name and Address of Curren NSKY, NORMAN M	it Hegistered Agent	81	Na	me	10. Name and Address of New R	egistered A	Agent	
3908 COCOANUT TERR. BRADENTON FL 34210				<u> </u>		ss (P.O. Box Number is Not Accepte			
					eet Addres	ss (F.O. Box Number is Not Accepte	10(6)		
			83						
			84	Cit	У		FI	85 Zip	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	2 and 607.1508, Florida Statutes of Florida Such change was au ations of, Section 607.0505, Flori	s, the abov thorized b ida Statute	e-nar y the s.	ned corpo corporatio	ration submits this statement for the on's board of directors. I hereby according to the contract of the contr		changing it pintment as	ts registered registered
SIGNATURE									
Signature, typed or printed name of registered agent and tille if applicable (NOTE Re 12. OFFICERS AND DIRECTORS					nature required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTOR	RS IN 12
TITLE	PTD DELETE		1.1 TITLE		···			Change	Addition
NAME STREET ADDRESS	DINSKY, NORMAN M. 3908 COCOANUT TERR.		1.2 NAME 1.3 STREET ADDRESS						
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP		ESS				
TITLE	VSD	DELETE	2.1 TITLE	31 - EIF	·-·			Change	Addition
NAME	DINSKY, NANCY M.		2.2 NAME						
STREET ADDRESS	DDADCHTON CA			2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	DELETE DELETE		2. 4 City - St - ZiP 3.1 Title		<u></u>			☐ Change	Addition
NOVAIC:			3.2 NAME				'	onango	
STREET ADDRESS	11		3.3 STREET	3.3 STREET ADDRESS					
CITY-ST-ZIP TITLE				3.4. CITY-ST-ZIP					4.4.201
NAME			4.1 TITLE 4.2 NAME				l	Change	Addition
STREET ADDRESS			4.3 STREET		ss				
CITY-ST-ZIP			4.4 CITY-S						
TITLE		DELETE	5.1 TITLE					☐ Change	Addition
NAME			5.2 NAME						

16. 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.

SIGNATURE:

When 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.

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

NAME

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DELETE

Change

Addition