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

PROFIT CORPORATION ANNUAL REPORT



## Sandra B. Mortham

Secretary of State

## **FILED** Feb 03 1998 8:00am

	1998			DIVISION OF CORPORATIONS				Secretary of State				
DOCUMENT # 693662 (9) VERA A.L. QUIGLEY, P.A.								Secretar	y OI		110	
, APT 12	N.L. GOIGLLI	1 171					1	I INSTANTA BEARNA COLONIA ARRAM BARRAM MILITA ARRA			# 11011 1831	
Principal Place of Business Mailing Address										41411 4141		
% VERA A.L. 23100 SW 15	QUIGLEY S2ND AVENUE	% VERA A.L. QUIGLEY 23100 SW 152ND AVENUE										
GOULDS FL		GOULDS FL 33170				<u> </u> _	DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualified 07/06/1981					
2. Principal P	lace of Business	2a. Mailing Address					4. FEI Number Applied For					
21		26					59-2111093			ot Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				i	5. Certificate of Status Desired	□ \$	8.75 / Fee Re	Additional	
City & State				City & State				6. Election Campaign Financing		<del>.</del>	May Be	$\dashv$
23			28					Trust Fund Contribution		Added t		╛
Zip	<del>}</del> 7	untry	Zip	ļ.,	Country	4		8. This corporation owes or has pai			angible 7 No	Ì
24	9. Name and Ad	Idress of Curren	29 t Registered A		30		1	Personal Property Tax due June :  0. Name and Address of New Reg			7 NO	$\dashv$
GL	JIGLEY, VERA A.L				81	Name					<del></del>	1
23100 SW 152ND AVENUE						Street A	Address	(P.O. Box Number is Not Acceptable	e)			$\dashv$
GC	OULDS FL 33170										_	
					84	City			FL 8	5 Zip (	Code	7
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S						e-named o	corpora	tion submits this statement for the pu		nging it:	s registered	┨
oπice or r agent. 1 a	egistered agent, or i m familiar with, and	ooin, in the State accept the obliga	tions of, Sections	n change was au on 607.0505, Flor	itnorizea bi Ida Statute	y tne corp s.	ooration:	s board of directors. I hereby accept	tine appointr	nent as	registerea	
SIGNATURE	~								-			
Signature, typed or printed name of registered agent  12. OFFICERS AND						istered Agent signature requirer 13.		ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIF	ECTOR	S IN 12	- [
TITLE	PVS			DELETE	1.1 TITLE					Change	Addition	13
NAME	QUIGLEY, VER				1.2 NAME							2
STREET ADDRESS	23100 W 152N				ADDRESS						[	
CITY-ST-ZIP TITLE	GOULDS FL_ TD			DELETE	1.4 CITY - 9 2.1 TITLE	ST-ZIP				Change	Addition	46
NAME	QUIGLEY, VER	A A.L.		Las Decere	2.2 NAME	}				21 vir.180		
STREET ADDRESS	23100 W. 152				2.3 STREET	ADDRESS						Ì
CITY-ST-ZIP	GOULDS FL				2. 4 CITY-	ST-ZIP						
TITLE				☐ DELETE	3,1 TITLE	- 1				Change	Addition	
NAME					3.2 NAME 3.3 STREET	4000500						
STREET ADDRESS CITY-ST-ZIP					3,4 CITY-1							
TITLE		~ <del></del>		DELETE	4.1 TITLE	51-24				Change	Addition	1
NAME					4. 2 NAME							
STREET ADDRESS					4.3 STREET	ADDRESS						
CiTY-ST-ZIP				DELETE	4.4 CITY - S	T-ZIP			-	Change	☐ Addition	4
TITLE NAME				II DELETE	5.1 TITLE 5.2 NAME					v en At		
STREET ADDRESS					5.3 STREET	ADDRESS						
City-St-ZIP					5.4 CITY-S							
TITLE				☐ DELETE	6.1 TITLE					Change	Addition	1
NAME					6.2 NAME	Ī						
STREET ADDRESS					6.3 STREET							
14. I hereby c	ertify that the inform	ation supplied wit	h this filina do	es not qualify for	6.4 CITY-S the exemp		d in Sec	tion 119.07(3)(i), Florida Statutes. I fu	urther certify	hat the	information	1
indiantad	on this appual report	or cumplemental	oppural report	e true and accur	ata and the		antura al	all have the came local offect as if a	nada undar c	oth, the	+ 1 000 00	