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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F11348

(2)

Mailing Address

DONALD G. HOEY ASSOCIATES, INC.

6816 ALTAMIRA STREET C/O DONALD G. HOEY CORAL GABLES FL 33146		6816 ALTAMIRA STREET C/O DONALD G. HOEY CORAL GABLES FL 33146-3812							
						 Date Incorporated or Qualified 12/17/1980 		te of Last F)5/1996	leport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	***************************************	A	oplied For
21		26				59-2046105		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	е	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 3	Zip Country			6. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes \(\sigma\) No			
27	9. Name and Address of Currer		101		·· · · · ·	10. Name and Address of New Reg			
UΛE		it tregretered regulit	81		Name	10, realite and Address of New Neg	1416160 /	Apur	
	EY, DONALD G.			L.	10110	· ·			i
	B ALTAMIRA STREET PAL GABLES FL 33146		82	9	Street Add	ress (P.O. Box Number is Not Acceptable	9)		
			83						
			84	(City		FL	85 Zip	Code
omce or r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was au	thorized b	v th	named corr ne corporat	poration submits this statement for the pution's board of directors. I hereby accept	rnona of	changing it	ls registered registered
SIGNATURE	Signature, typed or printed name of registered age				Signature zegui	red when reinalating)	DATE		****
12.	OFFICERS AN		T 13.		ang lactor or a qui	ADDITIONS/CHANGES TO OFFICE		DIRECTOR	29 IN 12
TITLE	DP	DELETE	1.1 TITLE		· · · · · · · · · · · · · · · · · · ·	ADDITIONS CHARGES TO STATE	JIO AINE	Change	Addition
NAME	HOEY, DONALD G		1.2 NAME					C. Change	reduitori
STREET ADDRESS	6816 ALTAMIRA ST				Poten				-
	CORAL GABLES, FL 00000		1.3 STREET						1
CITY-ST-ZIP TITLE	VSD	DELETE	1.4 CITY-5 2.1 TITLE	\$1-2	ZIP			Change	Eddition
NAME	HOEY, MARTA E	beer	4					L. Change	Addition [
-	6816 ALTAMIRA ST		2.2 NAME 2.3 STREET ADDRESS						ļ
STREET ADDRESS	CORAL GABLES, FL 00000								
CITY - ST - ZIP	DELETE			2. 4 CITY-ST-ZIP 3.1 TITLE				Change	I delito o
1	— — — — — — — — — — — — — — — — — — —			1				LI Change	Addition
NAME			3.2 NAME						i
STREET ADDRESS			3.3 STREET		1				
CITY-ST-ZIP		T bruttr	3.4. CITY - 4.1 TITLE	ST-	ZIP				
TITLE								L Change	☐ Addition
NAME			4. 2 NAME						J
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP		Dr. Fre	4.4 CITY - S	ST - Z	ZIP				
TITLE		☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	T ADI	DRESS				
CITY - ST - ZIP			5.4 CITY - 5	ST-2	ZIP		·····		
TITLE		☐ DELETE	6.1 TITLE					☐ Change	Addition
NAME			6.2 NAME				. %	•	_
STREET ADDRESS			6.3 STREET	T ADI	ORESS				.
CITY - ST - ZIP			6.4 CITY - 5						
informatio Lam an ol	in indicated on this annual report or s	upplemental annual report is true the receiver or trustee empower	e and acci ed to exec	urai	te and that	d in Section 119.07(3)(i), Florida Statutes. I my signature shall have the same legal n as required by Chapter 607, Florida St	offort ac	if made un	der nath: that