

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

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Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90056 029 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F48057

1. Corporation Name

GALEN NEFF & ASSOCIATES, INC.

Principal Place of Business

817 ALHAMBRA CIR. CORAL GABLES, FL. 33134
P.O. BOX 144096
CORAL GABLES FL 33114

Mailing Address

817 ALHAMBRA CIR. CORAL GABLES, FL. 33134
P.O. BOX 144096
CORAL GABLES FL 33114

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1981

4. FEI Number

59-2131102

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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SNOWDEN, CHARLES H
2000 S DIXIE HWY
SUITE 212
MIAMI FL 33133

81 Name

GALEN NEFF

82 Street Address (P.O. Box Number is Not Acceptable)

817 ALHAMBRA CIRCLE

83

84 City

CORAL GABLES

FL

85 Zip Code

33114

11. 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

Galen Neff

GALEN NEFF

1/12/99

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME NEFF, GALEN
STREET ADDRESS 817 ALHAMBRA CIR.
CITY-ST-ZIP CORAL GABLES FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VP ☐ DELETE

NAME NEFF, CHRISTOPHER
STREET ADDRESS 817 ALHAMBRA CIR
CITY-ST-ZIP CORAL GABLES FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE: *GALEN NEFF*

Date

Daytime Phone #

CR2E034 (11/98)