

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONSAPPROVED
AND
FILED

95 MAY -1 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # F83112 (5)**

1. Corporation Name

DONALD H. GATELY & ASSOCIATES, INC.

Principal Place of Business

**160 WIMBLEDON CT.
LAKE BLUFF IL 60044**

Mailing Address

**160 WIMBLEDON CT.
LAKE BLUFF IL 60044**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/27/1982

3a. Date of Last Report

04/29/1994

4. FEI Number

59-2197473

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 101 VIRGINIA DRIVE

2a. Mailing Address

26 101 VIRGINIA DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 WINTER PARK, FL

City & State

28 WINTER PARK, FL

Zip

24 32789

Country

Zip

29 32789

Country

30

9. Name and Address of Current Registered Agent

**RINGEL, THOMAS
9400 S. DADELAND BLVD, STE-225
MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GATELY, DONALD
STREET ADDRESS	160 WIMBLEDON CT.
CITY - ST - ZIP	LAKE BLUFF IL
TITLE	SD
NAME	GATELY, DORIS B
STREET ADDRESS	160 WIMBLEDON COURT
CITY - ST - ZIP	LAKE BLUFF IL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☐ Addition
1.2 NAME	GATELY, DONALD H.	
1.3 STREET ADDRESS	101 VIRGINIA DRIVE	
1.4 CITY - ST - ZIP	WINTER PARK, FL	
2.1 TITLE	SD	☐ Change ☐ Addition
2.2 NAME	GATELY, DORIS B.	
2.3 STREET ADDRESS	101 VIRGINIA DRIVE	
2.4 CITY - ST - ZIP	WINTER PARK, FL	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Donald H. Gately
SIGNATURE AND TYPED OR PRINTED NAME OF AGENT AND OFFICER OR DIRECTOR
DONALD H. GATELY**3-31-95**

(Date)

(407) 644-6380

(Telephone Number)