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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002572 (4)

1. Corporation Name
LAFFERTY & ASSOCIATES, INC.



Principal Place of Business

58 REDCOAT ROAD
WESTPORT CT 06880

Mailing Address

58 REDCOAT ROAD
WESTPORT CT 06880-1415

3. Date Incorporated or Qualified
05/26/1995

3a. Date of Last Report
06/18/1996

2. Principal Place of Business

21 4300 S. US Highway 1

Suite, Apt. #, etc.

22 203-340

City & State

23 Jupiter, FL

Zip

24 33477

Country

2a. Mailing Address

26 4300 S. US Highway 1

Suite, Apt. #, etc.

27 203-340

City & State

28 Jupiter, FL

Zip

29 33477

Country

30

4. FEI Number
06-1423534

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

9. Name and Address of Current Registered Agent

WITHERS, TONI
11643 NE 11TH PL.
BISCAYNE PARK FL 33161

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 title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE

NAME LAFFERTY, JOE
STREET ADDRESS 58 REDCOAT RD.
CITY-ST-ZIP WESTPORT CT 06880

TITLE DS ☐ DELETE

NAME LAFFERTY, INGER H
STREET ADDRESS 58 REDCOAT RD.
CITY-ST-ZIP WESTPORT CT 06880

TITLE DV ☐ DELETE

NAME WITHERS, TONI
STREET ADDRESS 11643 NE 11TH PL.
CITY-ST-ZIP BISCAYNE PARK FL 33161

TITLE T ☐ DELETE

NAME LAFFERTY, C.D.J.
STREET ADDRESS 58 REDCOAT RD.
CITY-ST-ZIP WESTPORT CT 06880

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 4300 S. US Highway 1, Ste 203-340
1.4 CITY-ST-ZIP Jupiter, FL 33477

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 4300 S. US Highway 1, Ste 203-340
2.4 CITY-ST-ZIP Jupiter, FL 33477

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 4300 S. US Highway 1, Ste 230-340
4.4 CITY-ST-ZIP Jupiter, FL 33477

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 does not qualify for the exemption stated in Section 119.07(3)(j), 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: *[Signature]* C.D.J. LAFFERTY 4/26/97 561 747 8827

CR2E034 (9/96)