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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🦼

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500002572 (4) LAFFERTY & ASSOCIATES, INC.				
Principal Plac	ce of Business	Mailing Address		
1 '	·	-4900-E-US-HIGHWAYT		
#300 & US HIGHWAY 1 203-340 203-340		-		
JUPITER FL 33477		JUPITER FL 33477		DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualified
2 Principal F	Place of Business	2a. Mailing Address		05/26/1995 4. FEI Number Applied For
21	nuce of Business	26. Walling Address	/	7,00000
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06-1423534 Not Applicable \$8.75 Additional
22 16331 Port Dickinson Dr. 27 16		27 16331	Dort Dai	5. Certificate of Status Desired Fee Regulred
Ory & Stat	er, FL 33477	City & State	FOR DICK	Inson. Dration Comparing Figure 19
29			r, FL 33477	7 Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
	THERS, TONI		ioi Name	C. D. J. Lafferty
	643 NE (1TH PL.		82 Street	Address (P.O. Box Number is Not Acceptable)
BR	SCAYNE RARK FL 33161		83	1/221 D (D'1)
'•	<i>Y</i> \			16331 Port Dickinson Dr.
]			84 City	Jupiter, FL 33477 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 registerer.				
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.				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
SIGNATURE	Signature Typers or minimum to the survey of Spars	and the dapplication (NOTE. I	Registered Agent signature	required when reinstating) DATE
12.		DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CP	DELETE	1.1 TITLE	C. D. J. Lafferty CP&T Change Addition
NAME	LAFFERTY, JOE		1.2 NAME	
STREET ADDRESS	4300 S US HWY 1, #203-340		1.3 STHEET ADDRESS	16331 Port Dickinson Dr.
CITY-ST-ZIP	JUPITER FL	Ta DELETE	1.4 City-St-ZiP	Jupiter, FL 33477
TITLE	OS INCEDIO	☐ DELETE	2.1 TITLE	Change Addition
NAME NYDEST ADDRESS	LAFFERTY, INGER H		2.2 NAME	
STREET ADDRESS CITY-ST-ZIP	4300 S US HWY L, #203-340 JUPITER FL		2.3 STREET ADDRESS	
TITLE	DV DV	DELETE	2.4 CITY - ST - ZIP 3.1 TITLE	☐ Change ☐ Addition
NAME	WITHERS, TONI		3.2 NAME	College C Mutilitie
STREET ADDRESS	11643 NE 11TH PL.		3.3 STREET ADDRESS	
CITY-ST-ZIP	BISCAYNE PARK FL 33161	1	3.4. CITY-ST-ZIP	
TITLE	T	DELETE	4.1 TITLE	Change Addition
NAME	LAFFERTY, C.D.J.	, ,	4. 2 NAME	g- built 1.00111411
STREET ADDRESS	4300 S US HWY L, #203-340		4.3 STREET ADDRESS	
CITY-ST-ZIP	WESTPORT CT		4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-S1-ZIP			5.4 CITY-ST-ZIP	
TITLE	. *	☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS	* .		6.3 STREET ADDRESS	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 recoiver 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.

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7.17.0027

FILED

Mar 02 1998 8:00am

Secretary of State