## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 16 1997 8:00am

Secretary of State

3a. Date of Last Report 03/20/1996

3. Date Incorporated or Qualified 06/30/1995

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

Principal Place of Business

**BOCA RATON FL 33429** 

PO BOX 1657

F95000003178 (9)

Mailing Address

BOCA RATON FL 33429-1657

PO BOX 1657

DICK BRADLEY AND ASSOCIATES, INC.

2. Principal Pla	ace of Busin	ness	2a. Mail	ng Address			4. FEI Number	٨		Ap	plied For		
21			26					04-323441	ט			t Applicable	
Suite, Apt. i	#, etc.		27	Suite, Apt. #, etc.				5. Certificate of Statu	us Desired		\$8.75 / Fee Re		
City & State				City & State				6. Election Campaig	n Financino		\$5.00		
23			28	28				Trust Fund Contrib			Added t		
Zip		Country	Zip	Zip Cou				8. This corporation h	as liability for	r intangible	tax under s.	199.032,	
24		25	29]	J			Florida Statutes 🔲 Yes 🔀 No						
	9. Name	and Address of Curr	81	N	10. Name and Addre	88 of New R	egistered /	\gent					
							81 Name						
BRADLEY, RICHARD J							Street Addre	ess (P.O. Box Number is	Not Accepta	ble)			
800 E. JEFFREY ST, SUITE 406									· · · · · · · · · · · · · · · · · · ·				
PORTA BELLA SOUTH													
BOCA RATON FL 33487							City			FL	<b>85</b> Zip (	Code	
11 Purcuant to the provisions of Sections 617 0502 and 617 1508 Florida Statutos the a							-named corn	oration submits this state	ment for the		changing it	s registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503. Florida Statutes.													
1													
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulated when reinstating):  DATE													
12.	OFFICERS AND DIRECTORS							ADDITIONS/CHAN	GES TO OFF	ICERS AND	DIRECTOR	S IN 12	
TITLE	CPS			DELETE	1.1 TIT)	LE					☐ Change	Addition	
NAME	BRADLE	Y, RICHARD J		1.2 N									
STREET ADDRESS	800 E. J	ieffery st		1.3 \$			ADDRESS						
CITY-ST-ZIP	BOCA R	ATON FL 33487		1.4			r- ZIP						
TITLE	TD			☐ DELETE	2.1 TIT	LE		· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition	
NAME		Y, JOAN M		2.2 NA									
STREET ADDRESS		ieffery st		23\$			ADDRESS						
CITY-ST-ZIP		IATON FL 33487			2. 4 CIT		T-ZIP	·					
TITLE	D			DELETE	3.1 7171						Change	Addition	
NAME		NELL, ROBERT J			3.2 NAI	1							
STREET ADDRESS		ENLEAF RD					ADDRESS						
CITY - ST - ZIP		OD MA 02062					T-ZIP				D 01	A statistics	
TITLE	D	10. 14/0111244		☐ DELETE	4 1 TITI						Change	Addition	
NAME		ID, WILLIAM		4 2 1									
STREET ADDRESS		NTRYSIDE RD					ADDRESS						
City-St-ZIP	D D	GANSETT RI 02882					r-ZIP				Change	Addition	
TITLE		UNION MYDGRY		- DELETE	51 TIT:							i raunun	
NAME	MCDONOUGH, MARSHA						1000000						
STREET ADDRESS	42 FAIRMOUNT AVENUE WAKEFIELD MA						ADDRESS						
CITY-ST-ZIP TITLE	D DELETE				5.4 CIT 6.1 TIT		1-ZIP				Change	Addition	
NAME	-	Y, FRANCIS			6.2 NA							(۱۳۵۰۰۱۰۰۰ رے	
STREET ADDRESS		RSIDE STREET			1		ADDRESS						
CITY-ST-ZIP	AIPPRILATE SAN						CITY-ST-ZIP						
14. Ldo bereb	v certify tha	t the information supp	lied with this fili	ng does not quali	fy for the	exer	motion stated	in Section 119.07(3)(i).	Florida Statul	tes. I furthe	certify that	the	
informatio	n indicated -	on this annual report of	r supplemental	annual report is t	rue and a	ccu	rate and that	my signature shall have t as required by Chapter	the same led	al effect as	if made un	der oath; that	
appears in	Block 12 c	or Block 13 if changed	or on an attach	rment with an add	dress.		opo.	· · ·	- : / /		, ,	· · <del>-</del>	