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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000003178

1. Corporation Name

DICK BRADLEY AND ASSOCIATES, INC.

Principal Place of Business

PO BOX 1657
BOCA RATON FL 33429

Mailing Address

PO BOX 1657
BOCA RATON FL 33429



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

3. Date Incorporated or Qualified

06/30/1995

4. FEI Number

04-3234419

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BRADLEY, RICHARD J
800 E. JEFFREY ST, SUITE 406
PORTA BELLA SOUTH
BOCA RATON FL 33487

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 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.

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 CPS ☐ DELETE

NAME BRADLEY, RICHARD J
STREET ADDRESS 800 E. JEFFERY ST
CITY-ST-ZIP BOCA RATON FL 33487

TITLE TD ☐ DELETE

NAME BRADLEY, JOAN M
STREET ADDRESS 800 E. JEFFERY ST
CITY-ST-ZIP BOCA RATON FL 33487

TITLE D ☐ DELETE

NAME O'DONNELL, ROBERT J
STREET ADDRESS 13 GREENLEAF RD
CITY-ST-ZIP NORWOOD MA 02062

TITLE D ☐ DELETE

NAME HOLLAND, WILLIAM
STREET ADDRESS 11 COUNTRYSIDE RD
CITY-ST-ZIP NARRAGANSETT RI 02882

TITLE D ☐ DELETE

NAME MCDONOUGH, MARSHA
STREET ADDRESS 42 FAIRMOUNT AVENUE
CITY-ST-ZIP WAKEFIELD MA

TITLE D ☐ DELETE

NAME MCNARY, FRANCIS
STREET ADDRESS 50 RIVERSIDE STREET
CITY-ST-ZIP NEEDHAM MA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD J. BRADLEY PRESIDENT

1/6/99

Date

(508) 995-9074

Daytime Phone #

0043200

CR2E037 (11/98)