

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra E. Matheson

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # H23409

1. Corporation Name

FRANK P. DALY, III, INC.

422-96 B-4095 NC
(6)



Principal Place of Business

4144 S.E. FAIRWAY EAST
STUART FL 34997
US

Mailing Address

P.O. BOX 1096
P.O. BOX 1096
PT. SALERNO FL 34992
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

DALY, FRANK P., III
4144 S.E. FAIRWAY EAST
STUART FL 34997

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

09/21/1984

3a. Date of Last Report

05/01/1995

4. FID Number

59-2777585

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. 193.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
DP	DALY, FRANK P., III	4144 S.E. FAIRWAY EAST	STUART FL	☐
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-STATE-ZIP	☐	☐	☐
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-STATE-ZIP	☐	☐	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-STATE-ZIP	☐	☐	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-STATE-ZIP	☐	☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-STATE-ZIP	☐	☐	☐
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-STATE-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(2)(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 a duly authorized person 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 addition with an address.

SIGNATURE:

Frank P. Daly III FRANK P. DALY III 4/15/96 407 283 7180
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)