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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J25184

(9)

NOLAN AND ASSOCIATES, INC.

OLAN AND ASSOCIATES, INC.

Principal Place of Business Mailin

BS1 N.E. 70TH ST. BOCA RATON FL 33487 Mailing Address

851 N.E. 70TH ST. BOCA RATON FL 33487-243

FILED Mar 13 1997 8:00am Secretary of State



BOCA RATON	FL 30407	BOGA HATUN FL 3390/12	401				
					3. Date Incorporated or Qualified 07/22/1986	3a. Date of Last 05/01/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26					Not Applicable
Sulte, Apt. #, etc.		Suito, Apt. #, etc.			5. Certificate of Status Desired See Regulired Fee Regulared		
City & State	e	City & State			6. Election Campaign Financing		0 May Be
23		28			Trust Fund Contribution		or may be d to Fees
Zip	Country	Zip	Cour	iry	8. This corporation has fiability for in	ntangible tax under	s. 199.032,
24 .	25	29	30			Yes 🗌 No	
	9. Name and Address of Curren	l Registered Agent			10. Name and Address of New Reg	istered Agent	
NOL	AN, FRANCIS P. III		;	Name			
	NORTHEAST 70TH STREET		ļī	Street Ac	idress (P.O. Box Number is Not Acceptable	e)	
BUC	CA RATON FL 33487		ļ	83			
			ļ	34 City		FI 85 Zip	o Code
44 Discussion	to the provisions of Papilana 507 000	2 and 607 1609 Finish 04-1	ton the et	avo namad :	exporation submits this statement for the		ito ropintorod
office or re agent. I a	egistered agont, or both, in the State m familiar with, and accept the obligations.	z and 607, 1505, Florida Statu of Florida. Such change was ations of, Section 607,0505, Fl	ies, me ab authorized lorida Statu	by the corpo tes.	orporation submits this statement for the piration's board of directors. I hereby accep	the appointment e	is registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NO	IE Registered	Agent signature rec	guired whon reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	DRS IN 12
TITLE	DP	☐ DECETE	1.1 101	E		☐ Change	Addition
NAME	NOLAN, FRANCIS P. III		1.2 NAM	1É			
STREET ADDRESS	851 N.E. 70TH STREET		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33487		1.4 CHY-S1-ZIP				
TITLE	DV	DELETE	2 1 101	E		Change	Addition
NAME	NOLAN, FRANCIS P. IV		2.2 NAN	MÉ .	•		
STREET ADDRESS	851 N.E. 70TH STREET		2.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33487			Y-S1-ZIP			
TITLE	DST	☐ DELETE	3.1 1110		#	☐ Change	Addilion
NAME	NOLAN, CLAIRE V.		3.2 NAM				
STREET ADDRESS	851 N.E. 70TH STREET		4	EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33487	T bereze		Y - \$1 - ZIP			1 4 4 695
TITLE	D ACAN	DELETE	4.1 1011			L Change	Addition
NAME	NOLAN, D. SEAN		4. 2 NA		,		
STREET ADDRESS	851 N.E. 70TH STREET			EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33487	Drieve		(-S1-ZIP			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE	D DATIOTA LOUIST ALOUAN	☐ DELETE	5 1 10).			Change	Addition
NAME	BATISTA, LOUISE NOLAN		5.2 NAN				
STREET ADDRESS	409 NE 107TH STREET			EE1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33161	FT burse		'- ST- ZIP		 	4 100
TITLE	**	DELETE	6.1 f(1)L	ĺ	•	Change	☐ Addition
NAME			6.2 NAM	-			
STREET ADDRESS			6.3 S1R	EET ADDRESS			!
CITY-ST-ZIP			6.4 C(T)	'- \$1 - ZIP			
. 4 4 1 4- 6		4	I . (- 4 to 10 - 2 to - 440 07/0/00 Etc. (4) - 01-4 4-5		

4. I do 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 logal effect as if made under oath; that it 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.

CIGNATUDE:

ANCINIA RIZONA

3/3/97

(57.1) 997-7157