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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secreta v of State DIVISION OF CORPORATIONS FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90086 040 \*\*\*150.00

## DOCUMENT # 1. Corporation Name J46008

J. WARD KENNY & ASSOCIATES, INC.

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Principal Plac	e of Business		Mailing Address							• • • • • • • • • • • • • • • • • • • •		
% J. WARD KE	ENNY		% J. WARD KENNY									
52 RIVER DRIVE			52 RIVER DRIVE				DO NOT WRITE IN THIS S			SPACE		
TEOUESTA FL 33469			TEQUESTA FL 33469				3. Date In proporated or Qualifed					
							12/08/	•	•			1
<del></del>	N		2= Mailing Address				4. FEI Nuit				Ann	ed For
	Place of Business		2a. Mailing Address				59-274			<del></del>	<u> </u>	Applicable
21	# -1-		Suite, Apt. #, etc.				39-21	10002		<b>¢</b> 8.7		ditional
Suite, Art.	. #, etc.		27 Suite, Apr. #, etc.				5. Certifcat	e of Status Desired			Req	
City & Stat	te		City & State				6. Election	Campaign Financing	П	<b>\$</b> 5.	<b>00</b> M	ay Be
23			28				Trust F	nd Contribution		Ado	led to	Fees
Zip	Cou	niry	Zip	Cor	untry		8. This co	poration owes the cur	rent year In	itangible		
24	25 29		30			Person	l Property Tax.		☐ Yes	[	No	
	9. Name and Add	dress of Current	Registered Agent		I		10. Name	nd Address of New	Registere t	Agent		
					81	Name						
KEN	iny, J. Ward				82	Street Add	roce (B.O. Boy	Number is Not Accept	table)	<del></del>		
52 F	river drive				02	Street Aug	11655 (F.O. BOX 1	vumber is ivot Accep	iabic)			
TEQ	IUESTA, FL33469 F	1			83							
					84	City			Fl	85	Zip Co	de
44 0		o ations 607 0602	and 607.1508, Florida Statu	Lee the r	hove	e-named co	noration submit	this statement for the			a its r	aistered
office or	registered agent, or be	oth, in the State o	Florida. Such change was a	authorized	d by	the corporati	ion's board of di	rectors. I hereby acce	ept the app	intment a	s regi	stered
agent. ⊢a	am familiar with, and a	scoept the obligati	ions of, Section 607.0505, Fl	⊭rida Stat	tutes	i.						
SIGNATURE									DATE			
	Signature, typed or printed in	OFFICERS AND	· — — — — — — — — — — — — — — — — — — —	13.		nt signature require	ed when reinstating)	NS/CHANGES TO O		NO DIRE	CTOE	S IN 12
12.	D0	JEFICERS AND	DELETE	1,1 T(			ADDITIO	NO/CHANGES TO O	TIOLINGIA	☐ Cha		Addition
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NAME	KENNY, J. WARD	)								_		
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CITY-ST-ZIP						T ADDRESS				_		
777.6	TEQUESTA FL			1.3 S	TREET							[] Addis
TITLE			☐ DELETE	1.3 \$	TREET					☐ Cha	nge .	Addition
NAME		<u> </u>	☐ DELETE	1.3 S	TREET					☐ Cha	nge	☐ Addition
	TEQUESTA FL	<u> </u>	☐ DELETE	1.3 S 14 C 2.1 Ti 22 N	TREET  TTY-S  TTLE  IAME					☐ Chai	nge	Addition
NAME	TEQUESTA FL		☐ DELETE	1.3 S 14 C 2.1 Ti 2.2 N. 2.3 S	TREET  TTY-S  TTLE  IAME	T-ZIP						
NAME STREET ADORE 3S	TEQUESTA FL		☐ DELETE	1.3 S 14 C 2.1 Ti 2.2 N. 2.3 S	TREET TITLE TAME TREET CITY-S	T-ZIP				☐ Chai		☐ Addition
NAME STREET ADORE 3S CITY-ST-ZIP	TEQUESTA FL			1.3 S 14 C 2.1 TI 22 N. 2.3 S 2.4 C	TREET OTTY-S TREET TREET OTTY-S TILE	T-ZIP						
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NAME STREET ADORE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME	TEQUESTA FL		☐ DELETE	135° 14C 21TI 22N. 235° 2.4C 31TI 32N 3.35° 34.C 4.1TI 4.2N	TREET THE TITLE	T-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP				☐ Cha	nge	☐ Addition
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NAME STREET ADORE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADORE SS	TEQUESTA FL		☐ DELETE	135° 14CC 2.1 TI 22 N. 2.3 S° 2.4 C° 3.1 TI 3.2 N. 3.3 S° 3.4 C° 4.1 TI 4.2 N. 4.3 S° 4.4 C° 5.1 TI	TREET TITLE TREET	T-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS				☐ Cha	nge	☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attact ment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Addition

Change