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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J62580 MCLAFFERTY CONSULTING, INC.

(2)

Mailing Address

FILED Feb 07 1997 8:00am Secretary of State

al discourse	

% GEORGE MCLAFFERTY 642 RIVERSIDE RD N. PALM BEACH FL 33408		642 RIVERSIDE RD	% George McLafferty 642 Riverside RD N. Palm Beach Fl. 33408-3726				3. Date Incorporated or Qualified	3a. Da			eport
						1	03/19/1987		23/18		• •
2. Principal Place of Business 2a. Mailing Addr			SS				4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Ť	Ар	plied For
21		26					59-2794468			No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired		•		dditional
22		27							•••••		quired
City & Stat	е	City & State				- 1	6. Election Campaign Financing				May Be
23 Z-p	Country Zip			Country			Trust Fund Contribution				
24	25	29	30	ar iti y		1	8. This corporation has liability for intangible tax under s Florida Statutes				
9. Name and Address of Current Registered Agent					-	<u>.</u>	10. Name and Address of New Reg				
MCI	LAFFERTY, GEORGE			81	Nan						
	RIVERSIDE RD										
N. PALM BEACH FL 33408				82	Stre	et Addres	ss (P.O. Box Number is Not Acceptab	le)			
				83			<u></u>		·····		
									· · · · · · · · · · · · · · · · · · ·		
				84	City			FI.	85	Zip C	ode
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Florida Stati	utes, the a	bove	-nam	ed corpor	ration submits this statement for the p	urpose of	chanc	ing-its	registered
office or r	registered agent, or both, in the t im familiar with, and accept the d	State of Florida, Such change was obligations of Section 607,0505, F	s authorize Florida Stat	d by	the c	orporation	n's board of directors. I hereby accep	t the app	ointme	nt as i	egistered
SIGNATURE	The same was a south the s	songations of occion out, coop, i	101100 0101	10102	•.						
SIGNATURE	Signature, typed or printed harne of register	ed agent and title it applicable (NC	OTE: Registere	d Age	nt signa	ture required	when reinstating)	DATE			
12.		S AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	CTORS	3 IN 12
TITLE	D	DELETE	1.1 Ti	TLE					☐ Ch	ange	Addition
NAME	MCLAFFERTY, GEORGE		1.2 N/	AME							
STREET ADDRESS	642 RIVERSIDE RD		1.3 \$1	TREET	ADDRES	s					
CITY+ST-ZIP	N. PALM BEACH FL		1.4 CI	TY - 5	T - ZIP						
TITLE		☐ DELETE	2.1 Tr	TLE					☐ Ch	ลกผูย	Addition
NAME			2.2 N/	AME							·
STREET ADDRESS			2.3 ST	TREET	ADDRES	s					
C+TY - ST - 71P			2.4 C	ITY - S	T-ZIP						
TITL L		L DELETE	3.1 11	TLE					☐ Ch	ange	Addition
NAME			3.2 N/	AME		1					
STREET ADORESS			3.3 \$1	TREET	ADDRES	s					
CITY - ST - ZIP					T-ZIP						
TITLE		DELETE	4.1 TI	TLE					☐ Ch	ange	Addition
NAME			4. 2 N	IAME							
STREET ADDRESS					ADDRES	ន					
CITY - ST - 7IP			4.4 C)	TY-S	T-ZIP						··-
TITLE		☐ DELETE	5.1 TI						Ch	ange	Addition
NAME			5.2 N/	AME							
STREET ADDRESS			5.3 ST	TREET	ADDRES	s					
C:TY - ST - ZIP		1 1 22.22	5.4 Ci		T-ZIP				-		
TITLE		☐ DELETE	6.1 TI						L Ch	ange	Addition
NAME			6.2 N/	AME							
STREET ADDRESS			6.3 \$1	reet	ADDRES	s					
CITY - ST - ZIP			6.4 CI	TY-\$1	I - ZiP	1	•				

14. 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 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 attachment with an address.

SIGNATURE: Juny N. m. Toffit GEORGE H. MCLAFFERTY

1-31-47