FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 3:36

DOCUMENT # **K01260** **(4)**

1. Corporation Name

KELLY & KELLY CERTIFIED PUBLIC ACCOUNTANTS, P.A.

Principal Place of Business	Mailing Address
C/O JOHN F. KELLY ~~2601 E OAKLAND PK BLVD #501~~ FT. LAUDERDALE FL 33306	C/O JOHN F. KELLY 3020 N FEDERAL HWY., BLDG. 11, 2ND FL FT. LAUDERDALE FL 33306 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/05/1987
3a. Date of Last Report: 04/18/1994
4. FEI Number: 59-2231103 ☐ 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. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 3020 N Federal Hwy	26
22 Suite, Apt. #, etc. Bldg 11 2nd FL	27 Suite, Apt. #, etc.
23 City & State Ft Lauderdale FL	28 City & State
24 Zip 33306 25 Country Broward	29 Zip 30 Country

9. Name and Address of Current Registered Agent

KELLY, JOHN F.
2601 E OAKLAND PARK BLVD #501
FT. LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3020 N Federal Hwy Bldg 11 2nd FL
83 Ft Lauderdale
84 City FL 85 Zip Code 33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	KELLY, JOHN F.	1.2 NAME	3020 N Federal Hwy
STREET ADDRESS	2601 E OAKLAND PK BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	Ft Lauderdale FL 33306
TITLE	VPD	2.1 TITLE	☐ Change ☒ Addition
NAME	KELLY, ELIZABETH	2.2 NAME	
STREET ADDRESS	3020 N FEDERALY HWY., BLDG. 11 2ND FL	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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(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: Elizabeth Kelly Elizabeth Kelly 3-23-95 305-561-0221
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0212003 CP