

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

APPROVED
AND
FILED

95 MAY -1 PH 8:39

DOCUMENT # **K97320** (1)

1. Corporation Name
FRAWLEY & ASSOCIATES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**9265 NW 9 CT
PLANTATION FL 33324
US**

Mailing Address

**9265 NW 9 CT
PLANTATION FL 33324
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/21/1989

3a. Date of Last Report
04/19/1994

4. FEI Number
65-0122269

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
21 **2667 N OCEAN BLVD**

2a. Mailing Address
26 **2667 N OCEAN BLVD**

Suite, Apt., #, etc.
22 **E-507**

Suite, Apt., #, etc.
27 **E-507**

City & State
23 **BOCA RATON, FL**

City & State
28 **BOCA RATON, FL**

Zip Country
24 **33431** 25 **USA**

Zip Country
29 **33431** 30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FRAWLEY, JAMES C.
780 S. PARK RD, #712
HOLLYWOOD FL 33021**

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
FRAWLEY, GEORGE
9265 NW 9 CT
PLANTATION FL**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
 Change Addition
**2667 N OCEAN BLVD E-507
BOCA RATON, FL 33431**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TS
FRAWLEY, GEORGE
9265 NW 9 CT
PLANTATION FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
 Change Addition
**2667 N OCEAN BLVD E-507
BOCA RATON, FL 33431**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
 Change Addition

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)(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE FRAWLEY 4/25/95 (407) 395-3132