FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 19 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (1) K97400 DALY COMPANIES, INC. Principal Place of Business Mailing Address % FRANK P. DALY, III % FRANK P. DALY, III 4144 FAIRWAY EAST 4144 FAIRWAY EAST STUART FL 34997 STUART FL 34997 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/22/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 4051 S US Huy 17-92 PO BOX 180551 65-0181507 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Casse / borry Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 32707 Country 23 CASSCE ber Trust Fund Contribution Added to Fees Ζip 8. This corporation owes or has paid the current year Intangible ろいす∮8 Personal Property Tax due June 30. Yes □ Ño 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DALY, FRANK P., III Vickery 4144 FAIRWAY EAST Street Address (P.O. Box Number is Not Acceptable) STUART FL 34997 Ecctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the appointment as registered that the state of Florida Statutes. MARK A VICKELY, PRES SIGNATURE stered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE DALY, FRANK P., III NAME 12 NAME 4144 FAIRWAY EAST 13 STREET ADDRESS STREET ADDRESS STUART FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE PREJ. Addition TITLE 2.1 TITLE MARK VICKERY ROS SPrins LAKE HILLS DR ALTAMONTE SPRING, FR. 32714 MARK A. VICKERY SOS SPRING LAKE HILL, DR NITAMONTE SPRINGS, FR NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change Addition TITLE 3 1 THILE 32 NAME NAME

6.4 City-St-ZIP 14. Thereby 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 arrival report or supplemental arrival 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 review 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 by an an attachment with an address

SIGNATURE:

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 City-St-ZiP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

3 4. CITY - ST- ZIP

4.1 TITLE

4. 2 NAME

51 TITLE

52 NAME 5 3 STREET ADDRESS

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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TITLE NAME

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