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

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<u></u>	1997	L. Armi		<u></u>	
DOCU 1. Corporation	IMENT # L5352	B (0)			
' '	IAN AND SHEEHAN, INC.				
				1 100 (1840 1841 A) (1841 A)	(1. 1.11 14 1.11 11 1.1114 1.1114 1.1114 1.1114 1.1114
					(
Principal Place of Business		Mailing Address			'
C/O KERRY SHEEHAN 250 AUSTRALIAN AVE. SO., STE. 704		C/O KERRY SHEEHAN 250 AUSTRALIAN AVE. SO., STE, 704			
	BEACH FL 33401	WEST PALM BEACH FL 3			
				 Date Incorporated or Qualified 02/26/1990 	3a. Date of Last Report 01/23/1996
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0176036	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Sta	41¢:	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25 9. Name and Address of Curre	29	30	Florida Statutes 10. Name and Address of New R	✓ Yes No
SH	EEHAN, KERRY	ont neglected Agent	81 Name	IV. Isamo and Podrove of Nov II	ogleleted Agent
	NE CLEARLAKE CENTRE		82 Street Ac	Idrona (P.O. Boy Number is Not Accepte	bla)
SU	JITE 704	ddress (P.O. Box Number is Not Accepted Australian Auc. Sc	uth Ste. 764		
WE	EST PALM BEACH FL 33401		B3	•	
			84 City		85 Zip Code
11 Durguen	d to the provisions of Sections 607.06	02 and 607 1609 Florida Statut	toe the above pamed a	ornaration submits this statement for the	nurpope of changing its registered
office or	registered agent, or both, in the State	te of Florida. Such change was	authorized by the corpo	orporation submits this statement for the oration's board of directors. I hereby accurate	ept the appointment as registered
SIGNATURE		gations of, Section 607.0303, Fi	unda Statules.		
	Signarize: types) or printed name of registered a		TE Registered Agent signature re		DATE
112.	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	SHEEHAN, HILARY A.	ב_ן סבנכונ	1.2 NAME	Hilary A. Sheehal	CO Oppules CO Additions
SIBILITADDRESS 250 S. AUSTRALIAN AVE. STE 704			1.3 STREET ADDRESS		
CHTY-SI-ZIP	WEST PALM BEACH FL 334	01	1.4 CITY - ST - ZIP		
TITLE	DVT	☐ DELETE	2 1 TITLE	D P F	Change Addition
NAME	SHEEHAN, KERRY 250 S. AUSTRALIAN AVE. S'	TE 704	2.2 NAME	Kerry Sheehan	
STREET ADDRESS	WEST PALM BEACH FL 334		2.3 STREET ADDRESS		
City - St - ZIP	WEST FROM DEPOTITE OF	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		<u> </u>	3.2 NAME		
STREET ADDRESS	3		3.3 STREET ADDRESS		•
CITY-ST-Z#			3.4. CITY - ST - ZIP		
THILE		☐ DELETE	4.1 TITLE		Change Addition
NAME NAME			4.2 NAME		
\$IRECT ADDRESS DITY-ST-ZIP	·		4.3 STREET ADDRESS 4.4 CITY-ST-2IP		
THILF		DELETE	5.1 TITLE		Change Addition
NAME		 "	5.2 NAME		
STHEET ADDRESS	5		5.3 STREET ADDRESS		
CHTY+S1-ZFF		~,	54 CITY-ST-ZIP		
TOTLE		☐ DELETE	6.1 TITLE		Change Addition

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.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY+ST- ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 7, 1997

561-659-3706 Dayting Phone #

at

32E034 (9/96)

FILED

Apr 14 1997 8:00am

Secretary of State