SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Oct 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mörtham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** M24036 (9) NEW YORK ASSOCIATES, INC. Principal Place of Business Mailing Address 29259 U.S. 19 N. 29259 U.S. 19 N. CLEARWATER FL 33761 CLEARWATER FL 33761 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/02/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2774098 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible Ζφ Zip Personal Property Tax due June 30. 24 25 29 30 _ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FOLEY, TRACY 3259 FOX CHASE CIR. N. 82 #205 83 PLAM HARBOR FL 34683 City/ 84 11. Pursuant to the provisions of sections 697.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or boil, 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 significantly and accept the obligations of, section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE DELETE 1.1 TITLE Change hard D. Hayden NAME FOLEY, TRACY 1.2 NAME 29 259 US HWY19 3259 FOXCHASE CIR. N., #205 STREET ADDRESS 1.3 STREET ADDRESS PALM HARBOR FL 34683 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition HAYDEN, RICHARD 2.2 NAME NAME 29259 U.S. HIGHWAY 19 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER FL 33761 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE TITLE 300002656 NAME 4 2 NAME -10/06/98---01026-4.3 STREET ADDRESS STREET ADDRESS ***400.00 4.4 CITY-ST-ZIP CITY-ST-ZIF TITLE DELETE 5.1 TITLE Change 5.2 NAME NAME **300**0026565**8**3 5.3 STREET ADDRESS STREET ADDRESS -10/06/98--01026--0**45** 5.4 CITY-ST-ZIP CITY-ST-ZIP ***150.00 Change TITLE DELETE 6.1 TITLE NAME 6 2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 out; 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 change), or on an analysis that it with an address.

FILED



Horida Department of State Division of Corporations

August 18, 1998

To whom it may concern,

I apologize for the delay in filing our Profit Corporation Annual Report. Due to unforseen medical problems I was unable to file in a timely manner. Thank you for your cooperation.

Sincerely,

Medial Are
Richard D. Hayden

Secretary

ter, Florida 33761 Office: (813) 787-4000 Fax: 789-1622 Toll Free: (800) 245-5595