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Mar 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N02075 (2)

1. Corporation Name
MULLALLY MANOR, INC.



Principal Place of Business Mailing Address
MCASA SAN PABLE
401 N. RIDGEWOOD AVE.
DAYTONA BEACH FL 32114
US
C/O EDGAR M. DUNN, JR.
347 S. RIDGEWOOD AVE., PO DRAWER 2600
DAYTONA BEACH FL 32114-4933

3. Date Incorporated or Qualified 04/01/1984
3a. Date of Last Report 02/08/1996
4. FEI Number 59-2410785
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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
DUNN, EDGAR M JR
347 S. RIDGEWOOD AVENUE
DAYTONA BEACH FL 32115

10. Name and Address of New Registered Agent
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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS
TITLE PD DELETE
NAME KELLY, JOAN
STREET ADDRESS 512 PELICAN BAY DR.
CITY-ST-ZIP DAYTONA BEACH FL
TITLE VD DELETE
NAME ROANE, CURTIS
STREET ADDRESS 1726 RIDGE AVE.
CITY-ST-ZIP HOLLY HILL FL
TITLE D DELETE
NAME MCGRATH, STEPHEN
STREET ADDRESS 1312 RUTHBERN RD.
CITY-ST-ZIP DAYTONA BEACH FL
TITLE DS DELETE
NAME CLELAND, PATRICIA R
STREET ADDRESS 807 CORDOVA AVE
CITY-ST-ZIP ORMOND BEACH FL
TITLE TD DELETE
NAME WEBSTER, ROBERT R
STREET ADDRESS P. O. BOX 646 N/A
CITY-ST-ZIP DAYTONA BCH. FL
TITLE D DELETE
NAME WHITE, IATIE
STREET ADDRESS 169 GULL CIR., NORTH
CITY-ST-ZIP DAYTONA BCH. FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME Director
3.3 STREET ADDRESS Brown, Lonnie
3.4 CITY-ST-ZIP 37 Oakmont Circle
Ormond Beach, FL 32174-3891
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME D White, Katie
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joan Kelly* 2/26/97 254-4308
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #0002000

CR2E037 (9/96)