FILED
Mar 31, 2003 8:00 am
Secretary of State
03-20-2003 90114 041 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

55021027

DOCUMENT # P02000005265

1. Entity Name
DEHANEY & ASSOCIATES INC.

Principal Place of Business	Mailing Address
7763 MIRAMAR PKY MIRAMAR, FL 33023	7763 MIRAMAR PKY MIRAMAR, FL 33023

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 43-1949161 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHNSON, GAIL M 4310 NW 187TH STREET MIAMI, FL 33055	Name: Amy P DEHANEY Street Address (P.O. Box Number is Not Acceptable): 7763 MIRAMAR Parkway City: MIRAMAR FL Zip Code: 33023

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: Amy Dehaney AMY DEHANEY 3/28/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when submitting) DATE

FILE STORAGE FEE $ 150.00
Make Check Payable To: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
		President Amy P DEHANEY 7763 MIRAMAR Parkway Miramar FL 33023	
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Amy Dehaney 3/28/03 9542740759
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #