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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200009116 (4)

J. J. MCNAMARA, P.A.

Principal Place of Business

Mailing Address

FILED May 11 1998 8:00am Secretary of State



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4020 PARK STREET NORTH         4020 PARK STREET NORTH           SUITE 300         SUITE 300           ST PETERSBURG FL 33709         ST PETERSBURG FL 33709					
				DO NOT WRITE IN THI	S SPACE
				3. Date Incorporated or Qualified	
				12/02/1992	1
9 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 69 50	CENTAL AVE	26 6950 CEN	TRAI AVE	- FO 04F0C04	<del></del>
Suite, Apt.	ace of Business CENTRAL AVE. #, etc.	Suite, Apt. #, etc.	17750 7700	59-3153634	Not Applicable
22 5017	re 140	27 SUITE 1	40	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State <b>\$7</b> .	PETERGBURY, FL	City & State  28 ST. PESBAS  Zip	BURL, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>53</b> 7	Country	29 33707 30	¬	<ol> <li>This corporation owes or has paid the of Personal Property Tax due June 30.</li> </ol>	current year Intangible
	g. Name and Address of Current I	Registered Agent		10. Name and Address of New Registers	d Agent
MC	NAMARA, J J	<del>-</del> -	81 Name		
4020 PARK STREET N ST PETERSBURG FL 33709			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
	(0 - 003 11 00	1007 (100 E)		F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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 607.0505, Florida Statutes.					
SIGNATURE					
SIGNATURE .	Signature, typed or printed have of registered agent	and title if applicable (NOTE: B	legistered Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOTALE		☐ Change ☐ Addition Ş
NAME	MCNAMARA, J J		1.2 NAME		(2
STREET ADDRESS	4020 PARK STREET N		1.3 STREET ADDRESS		Įį
CITY-ST-ZIP	ST PETERSBURG FL 33709		1.4 CITY - ST - ZIP		<u>ַ</u>
TITLE	VD	DELETE	2.1 TITLE		☐ Change ☐ Addition C
NAME	MCNAMARA T P		2.2 NAME		
STREET ADDRESS	4020 PARK ST NO	1	2 3 STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •	1
CITY-ST-ZIP	ST PETERSBURG FL		2. 4 CITY - ST - ZIP		
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NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
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CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
ſ			4 2 NAME		
NAME					}
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T Drugge	4.4 CITY - ST - ZIP		Character Landston
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME [			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		}
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE	is L	↓☐ DELETE	61 TITLE		☐ Change ☐ Addition │
NAME	· ·		6.2 NAME		1
STREET ADDRESS	1		6.3 STREET ADDRESS		1
CITY-\$T-ZIP			6.4 CITY-ST-ZIP		
	ertify that the information supplied with	this filing does not qualify for t		Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report or supplied with this iming does not quality for the extension stated in section 1.19.07(5)(f), Florida Statutes. I further centry that the informatic indicated on this annual report or supplience and 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 or an attachment with an address.

SIGNATURE:

M. Wamon

J.S. Mc NAMARA

4/29/98

(817)345-0375