## FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

THE PERSON NAMED IN

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

Mar 13 1997 8:00am

Secretary of State

Change

■ Addition

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000043313 (4)

CAHILL & O'CONNOR KENNEL, INC.

1111 NORTH CONGRESS AVENUE 1155 WOODCREST ROAD WEST W PALM BEACH FL 33409 W PALM BEACH FL 33417-5726 3. Date Incorporated or Qualified 3a. Date of Last Report 06/18/1993 07/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0425871 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country This corporation has liability for intangible tax under s. 199.032, 25 29 30 Florida Statutes ☐ Yes ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERGUSON, DARL D 2000 N. CONGRESS AVE. R2 Street Address (P.O. Box Number is Not Acceptable) # 208 83 **WEST PALM BEACH FL 33409** 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent a gnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 13. TITLE DELETE 1.1 TITLE Change Addition NAME CAHILL, TIMOTHY D 12 NAME 1155 WOODCREST ROAD W STREET ADDRESS 1.3 STREET ADDRESS W PALM BEACH FL CITY-ST-ZIP 1.4 C(1Y - S1 - Z(P DELETE TITLE 2.1 TITLE Change Addition NAME O'CONNOR, CYNTHIA K 2.2 NAME 1155 WOODCREST ROAD W STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY-\$1-ZIP TITLE DELE 1E 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS

5.4 C(TY-ST-Z(P

6.3 STREET ADDRESS

6.4 CITY - \$1 - 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 Statules, 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 logal 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

61 TITLE

6.2 NAME

DELETÉ