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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300050114

1. Corporation Name

MARYANN DONAGHY, INC.

Principal Place of Business

Mailing Address

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90068 013 ***150.00



206 WASHINGTONIA AVE LAUDERDALE BY THE SEA FL 33308 LAUDERDALE BY THE SEA FL 33308					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed			
					07/12/1993			
2. Principal Place of Business 2a. Mailing Address					4 FEI Number	Ap	plied For	
21 SISO GALT DENTH IR 26 3850 GALT DEATH					65-0419852	⊢ +−	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					05 04 1305Z	\$8.75	Additional	
				- :-	5. Certificate of Status Desired	Fee Re	·	
City & State City & State City & State City & State				PL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	,	
22				•	This corporation owes the current year Intan Personal Property Tax.	ngible Yes	□No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent								
81 Name								
DON	IAGHY, MARYANN		82	Street	Address (P.O. Box Number is Not Acceptable)			
206 WASHINGTONIA AVE					3850 GALT OCEANY DR			
LAUDERDALE BY THE SEA FL 33308					IT LAUDERDALE			
www.commons.com				City	FL		300	
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	Stgnature, typed or printed name of registered agent an	d title if applicable. (NOTE: Ri	egistered Age	nt signature n	equired when reinstating) DATE			
12. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	PD DELETE		1.1 TITLE			Change	☐ Addition	
NAME	DONAGHY, MARYANN		1.2 NAME		DOHACLUW MARJANN		ļ	
STREET ADDRESS)			TADDRESS	20 - CAL- OCEAN DR			
CITY-ST-ZIP LAUDERDALE BY THE SEA FL 33308				T-ZIP	DOHACHY MARYAND 3850 GALT OCEAN DA FT LAUSAGDALE PL J.	3.308	l l	
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TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
NAME			4.2 NAME		•		ļ	
STREET ADDRESS			4.3 STREE	TADDRESS			ł	
CITY-SY-ZIP			4.4 CITY- S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS			Į	
CITY-ST-ZIP	_		5.4 CITY-5	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	
NAME			6.2 NAME				ļ	
STREET ADDRESS			6.3 STREE	T ADDRESS			J	
CITY-ST-ZIP			6.4 CITY- 8	T-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 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 on an attachment with an address, with all other like empowered.

MAIG CATINGS DE DITRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAGE OFFICER OR DIRECTOR