

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Sep 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P93000088638 (0)

1. Corporation Name

MICHAEL DAEHN & ASSOCIATES, INC.

Principal Place of Business

220 34TH AVE. NORTH  
ST PETERSBURG FL 33704

Mailing Address

220 34TH AVE. NORTH  
ST PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1993

3a. Date of Last Report

08/12/1996

4. FEI Number

59-3126167

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 4655 BAYSHORE BLVD. N.E.

2a. Mailing Address

26 240 PEACHTREE ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 13-F-11

City & State

23 ST. PETERSBURG FL

City & State

28 ATLANTA GA

Zip

Country

24 33703

25 USA

Zip

Country

29 30303

30 USA

9. Name and Address of Current Registered Agent

NOLL, SUZANNE  
4502 S. MANHATTAN AVENUE  
SUITE 284  
TAMPA FL 33611

10. Name and Address of New Registered Agent

81 Name NOLL, SUZANNE  
82 Street Address (P.O. Box Number is Not Acceptable)  
4628 BYARLY CR.  
83  
84 City TAMPA FL 85 Zip Code 33634

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

N/A

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 NAME ☐ DELETE

PT  
DAEHN, MICHAEL  
4655 BAYSHORE BLVD. NE  
ST. PETERSBURG FL

TITLE NAME ☐ DELETE

V  
HALE, PAUL  
2089 BROOKVIEW DRIVE, N.W.  
ATLANTA GA

TITLE NAME ☐ DELETE

S  
DAEHN, MARILYN  
220 34TH AVENUE N  
ST. PETERSBURG FL

TITLE NAME ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

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

SIGNATURE

Paul HALE 9/9/97 404 522-6778

CR2E034 (4/97)