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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000067829**1. Corporation Name

O'HARE & COMPANY, INC.

Principal Flace	of Business	Mailing Address					
46 N. WASHINGTON BLVD 3707 75TH DRIVE EAST							
#13 SARASOTA FL 34243					DO NOT WRITE IN THIS S	DACE	
SARASOTA FL 34236					DO NOT WRITE IN THIS S	PACE	
US					3. Date Incorporated or Qualifed		1
					09/12/1994		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		otied For
21		26			65-0514696		Applicable
Suite, /xpt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22		27				Fee Re	
City & State		City & State			6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country Zip		Country	1	8. This corporation owes the current year Intan		_
24	25	29	30		T dice nairy reports y years		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Ag	gent	
			81	Name			
Burtless, Laureen M			82	Ctroot	Address (P.O. Bcx Number is Not Acceptable)		
3707	75TH DRIVE EAST		°	Street	Address (F.O. BCX Number is not neceptable)		
SARA	ASOTA FL 34243		83				
			L				
			84	City	FL	85 Zip :	Code
44 5	a the associations of Continue CO7 OFC 2	and 607 1609 Elorida Stati	itee the abou	a-pamed	comporation submits this statement for the purpose of ch	nanging its	registered
11. Pursuant to the provisions of Sections 607.05(2 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 ar	n familiar with, and accept the obligation	ons of, Section 607.0505, FI	orida Statute	3.			ļ
SIGNATURE					re surred when reinstating) DATE		
	Signature, typed or printed i ame of registered age it			nt signature r	re juired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
12.	OFFICERS AND	DELETE	13.			Change	Addition
TITLE	DP	C) VELETE	1.1 TITLE				
NAME	MYERS, ELIZABETH M		1.2 NAME				ļ
STREET ADDITESS	9938 ORTEGA LANE		1.3 STREE	TADDRESS			
C!TY-ST-ZIP	BONITA SPRINGS FL		14 CITY-S	T-ZIP			T A ddiz-
TITLE	DV	☐ DELETE	2.1 TITLE			Change	Addition
NAME	LEVAL, DENISE M		2.2 NAME				
STREET ADDRESS 140 BONAVENTURE BLVD #208			2.3 STREE	TADDRESS			
CITY-ST-ZIP	WESTON FL 38826		2. 4 CITY-	ST-ZIP			
TITLE	DV	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	MYERS, ELIZABETH A		3.2 NAME		· ·	-	
STREET ADDRESS	2758 TEMPLE ST		3.3 STREE	TADDRESS			
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-				İ
TITLE	DST	☐ DELETE	4.1 TITLE		5+	Change	☐ Addition
	BURTLESS, LAUREEN M	_	4. 2 NAME		- /	*	
NAME	3707 75TH DRIVE EAST			T ADDRESS			
STREET ADDRESS	SARASOTA FL 34243						
CITY-ST-ZIP	OANAOUIA FL 04240	☐ DELETE	4.4 CITY-:	31-211		Change	Addition
TITLE		() Deterie	5.1 TITLE 5.2 NAME				
NAME				T ADDRESS			
STREET ADD-RESS							
CITY-ST-ZIP			5.4 CITY-1	SI-ZIP		Character.	Addition
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				į
STREET ADD RESS			6.3 STREE	TADDRESS			
CITY-ST-ZIP			6.4 CITY-:	ST-ZIP			

14. Thereby 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 office r or director of the corporation or the receiver or mystee empowered to execute this report as required by Charter 607. Florida Statutes; and that my name appears in Block. 12 or Block 13 if charging, or on an attachment with an address, with all other like empowered.

SIGNATURE: