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 # P94000074132 (9)

GALLAGHER AND COMPANY, PA

FILED Mar 26 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address				
3501 DEL PRADO BLVD SUITE 207 CAPE CORAL FL 33904 3501 DEL PRADO BLVD SUITE 207 CAPE CORAL FL 33904 CAPE CORAL FL 33904				DO NOT WRITE	IN THIS SPACE	
014 2 001012				3. Date Incorporated or Qualified		
a Principal P	lace of Business	2a, Mailing Address		10/06/1994 4. FEI Number	Applied For	
21 3 5 0€	Del Prado Blud	26 3501 Del	Prado Blud	65-0527715	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	TVANV ICA YOU	1	\$8.75 Additional	
	re 204	27 Suite 204	f	5. Certificate of Status Desired	Fee Required	
City & Stat	. Coral PL	City & State Cape Cora		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 33	SAL Country	2 33904 B	Country	8. This corporation owes or has pa		
24 35	9 Name and Address of Current		30	Personal Property Tax due June 10. Name and Address of New Re		
		1 6 6				
GALLAGHER, JOHN C 3501 DEL PRADO BLVD				82 Street Address (P.Q. Box Number is Not Address that		
SUITÉ 207			82 Street Add	dress (P.O. Box Number is Not Acceptant	ле)	
	PE CORAL FL 33904		83 5431	te 204		
			84 City_	76 204	85 Zip Code	
	\sim	Α	- Co. 64	e Coral	FI 230AU	
 Pursuant office or r 	to the provisions of Sections 607.0502 egistered agents or both, to ric Glate	nd 607.1508, Florida Statutes Norida Such change was au	s, the above-named co athorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of changing its registered at the appointment as registered	
agent. I a	im familiar with, and iccopt he holiga				3/20198	
SIGNATURE	Signature, typod or printed are of egisted if agen	Find title if applicable (NOTE:	Registered Agent signalure requ	agher, President	7/20/48 DATE	
12.	OFFICERS AND	4	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	D (/	DELETE		DP	Change Addition	
NAME	GALLAGHER, JOHN C		1.2 NAME	who G Gallagher	1 545 264	
STREET ADDRESS 3501 DEL PRADO BLVD SUITE 207			1.3 STREET ADDRESS	soi Del Prodo Bly		
CITY-ST-ZIP	CAPE CORAL FL 33904		1.4 CITY-ST-ZIP	Cape Corol FL 33	904	
TITLE		☐ DELETE	2.1 TITLE	•	☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CFTY-ST-ZIP		DELETE	2. 4 CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		FT DETELE	3.1 TITLE		Change C Addition	
NAME CTOCCT ADDOCCO			3.2 NAME 3.3 STREET ADDRESS			
STREET ADDRESS			3.4. CITY-ST-ZIP			
CITY-SI-ZIP TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME		_ • —	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		·	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0 0 110 00000	4	
14. I hereby of indicated	certify that the information supplied wit i on this annual report or supplemental	n mit tiling does not qualify for annual report is true and accu	the exemption stated in trate and that my signal	n Section 119.07(3)(i), Florida Statutes. I ture shall have the same legal effect as if quired by Chapter 607. Florida Statutes:	made under oath, that I am an	