

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000000017

1. Entity Name
O'HAIRE, QUINN, CANDLER & CASALINO, CHARTERED



Principal Place of Business
**3111 CARDINAL DRIVE
VERO BEACH, FL 32963**

Mailing Address
**PO BOX 4375
VERO BEACH, FL 32964**



02032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0549320	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CANDLER, RICHARD B
3111 CARDINAL DR
VERO BEACH, FL 32963**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	O'HAIRE, MICHAEL
STREET ADDRESS	575 HWY A-1-A
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	VP
NAME	QUINN, JEROME D
STREET ADDRESS	308 LIVE OAK RD
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	S
NAME	CANDLER, RICHARD B
STREET ADDRESS	595 HWY A1A
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	T
NAME	CASALINO, GREGG M
STREET ADDRESS	11 SAILFISH ROAD
CITY-ST-ZIP	VERO BEACH, FL 32960

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000839362
03/06/08-80006-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Gregg M Casalino Trea 2/22/08 772-231-6900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #