

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

FILED
Apr 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000007263 (3)

1. Corporation Name
HAGGERTY & ASSOCIATES, INC.



Principal Place of Business

2800 N FEDERAL HWY
BOCA RATON FL 33431
US

Mailing Address

2800 N FEDERAL HWY
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 960 NW 8th ST	25 960 NW 8th ST
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Boca Raton FL	28 City & State Boca Raton FL
24 Zip 33486	29 Zip 33486
25 Country	30 Country

3. Date Incorporated or Qualified 01/27/1995	
4. FEI Number 65-0550683	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
HAGGERTY, BRIAN P 960 NW 8TH STREET BOCA RATON FL 33486		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGGERTY, BRIAN P	1.2 NAME	
STREET ADDRESS	960 NW 8TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGGERTY, GLENN R	2.2 NAME	
STREET ADDRESS	882 SW 21ST LANE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGGERTY, KAREN	3.2 NAME	
STREET ADDRESS	980 SW 20TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FELDMAN, MICHAEL	4.2 NAME	
STREET ADDRESS	500 NE SPANISH RIVER BLVD. STE. 205	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33431	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAYERS, CARMEN	5.2 NAME	
STREET ADDRESS	746 CAMINO LAKES CIR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FREY, NEAL V	6.2 NAME	
STREET ADDRESS	18160 181ST CIR. S.	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498	6.4 CITY-ST-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.

SIGNATURE: Brian P. Haggerty 3/31/98 561750977

CR2E034 (10/97)