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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Lam an officer or dire appears in Block 12

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 27 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000013407 (8)

PHILIP G. MCCANN AND ASSOCIATES P.A.

Principal Place of Business			Mailing Address 1120 ROYAL PALM BEACH				1100000	n januange isin salat nititi sanit matit nakat ankan tihan (tili binit hatit indi fabi				
1120 ROYAL PALM BEACH												
SUITE 258			SUITE 258									
ROYAL PALM I	BEACH FL 33411	HO	AL PALM BEACH FL	33411-1	1607		A D					
							02/16/1	rporated or Qualif <b>995</b>		ate of Last F /14/1996	leport	
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Numb			A	pplied For	
21			26				65-05	53853		No	ot Applicable	
Suite, Apt	#, etc		Suite, Apt. #, etc.				E Cartificat	of Ctatus Desired	d 🔲	\$8.75	Additional	
22		27					5. Certificati	e of Status Desired	u L	Fee Ro	equired	
City & State	e		City & State				6. Election (	ampaign Financir	ng	\$5.00	May Be	
23		28	28			Trust Fun	d Contribution			to Fees		
Zφ	Country	y Zip Co		Country		8. This corp	oration has liability	y for intangible	e tax under s	. 199.032,		
24	25					Fłorida Statutes Yes No						
Name and Address of Current Registered Agent								d Address of Ne	w Registered	Agent		
MCCANN, PHILIP G					81	Name	2					
1120 ROYAL PALM BEACH						Stree	t Address (P.O. Box N	umber is Not Acce	eptable)			
	TE 258 YAL PALM BEACH FL 33411				83		<del></del>					
וטח	AL PALM DEACH PL 33411				Ш	-			<del></del>	Ta _ 1 - m/		
					84	City			FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both in the Sta	502 and 60	7.1508, Florida Statu	ites, the	above	-name	d corporation submits	this statement for	the purpose of	f changing i	ts registered	
agent. La	m familiar with, and accept the obl	igations of,	Section 607.0505, F	lorida S	Statutes	ina co i.	ipolation a board of di	rectors. I hereby e	ассері іне арі	John Herit as	registered	
SIGNATURE	Signature typed or princed name of registered	accept and like if	and cable (N/	IF: Booist	ared Ane	ni sionalu	re required when reinstating)		DATE			
12.	OFFICERS A			1:				S/CHANGES TO C		DIRECTOR	IS IN 12	
TITLE	D		DELETE		1 TITLE	·····		· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition	
NAME	MCCANN, PHILIP G			1.1	2 NAME					•		
STREET ADDRESS	1120 ROYAL PALM BEACH			1	3 STREET	ADDRESS						
CITY - S1 - ZIP	<b>ROYAL PALM BEACH FL 33</b>	411		1	4 CITY - 51							
Title			DELETE		1 TITLE					Change	Addition	
NAME				2.	2 NAME							
STREET ADDRESS					3 STREET	ADDRESS						
CITY - ST - ZIP					4 CITY-S							
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NAME					2 NAME		1					
STREET ADDRESS					3 STREET .							
CITY - ST - ZIF				64	4 CITY - ST	T-ZiP					ľ	

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 in 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 required or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

Philip G. Mc Cann