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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

A SECURITY OF THE PARTY OF THE

P95000045447 (6)

DALY DEEDS, INC.

FILED Apr 29 1998 8:00am Secretary of State



	IIII DIBII DIBIA FOLA IOLI
Principal Place of Business Mailing Address	
710 HILLSIDE DRIVE LAKE WALES FL 33853 LAKE WALES FL 33853 DO NOT WRITE IN THIS SP	'ACE
3. Date Incorporated or Qualified	
06/06/1995	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
26 59-3380392	Not Applicable
Suite Ant # etc Suite Ant # etc	\$8.75 Additional
5. Certificate of Status Desired	Fee Required
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
23 Trust Fund Contribution	Added to Fees
Zip Country Zip Country 8. This corporation owes or has paid the curre	nt year Intangible
	Yes No
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	jent
DALY, TIMOTHY P	
710 HILLSIDE DR. B2 Street Address (P.O. Box Number is Not Acceptable)	
LAKE WALES FL 33853	
63	
84 City	85 Zip Code
FL	
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 c	hanging 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 appoil agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	mment as registered
SIGNATURE	
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND D	
TITLE DIP DELETE 1.1 TITLE	Change C Addition
NAME DALY, TIMOTHY P 12 NAME	
STREET ADDRESS 710 HILLSIDE DRIVE 1.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WALES FL 33853 1.4 CITY-ST-ZIP	
TITLE DELETE 2.1 TITLE	Change Addition
NAME DALY, SANDRA L 22 NAME	
STREET ADDRESS 710 HILLSIDE DRIVE 2.3 STREET ADDRESS	
CITY-ST-ZIP LAKE WALES FL 33853 2 4 CITY-ST-ZIP	
TITLE DELETÉ 31 TITLE	Change
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 34.CITY-ST-ZIP	
	Change Addition
NAME 4 2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
	Change Addition
NAME 5.2 NAME	
STREET ADDRESS ■ 5.3 STREET ADDRESS 1	
STREET ADDRESS 5.3 STREET ADDRESS 6.17 - ST-ZIP 5.4 CITY - ST-ZIP	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	Change Addition
CITY-ST-ZIP	_ Change Addition
	_ Change Addition
CITY-ST-ZIP	_ Change _ Addition

Indicated on this annual report or supplied with this filling does not qualify for the exemption sate of its extent in Section 17.5.05(f), indicated an this annual report or suppliemental 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.

The order of Dali

4/23/94

941-676-7776