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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPLIRTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90294 036 \*\*\*150.00

## DOCUMENT # P96000049358

1. Corporation Name

KENNEDY AND HUTCHISON, P.A.

Principal Place of Business Mailing Address									Bilipar kia lakia akini aakii a	(4)(); #3()) <b>2</b> 4()	14 B1040 FB10	ı ırıbı t	ILIBI LUIT IONI
2101 CORPORA	ITE BLVD. NW	2101 (	2101 CORPORATE BLVD. NW										
4TH FLOOR			4TH FLOOR				DO NOT WRITE IN THIS COACE						
BOCA RATON FL 33431 BOCA RATON FL 3			RATON FL 33431				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified						
							3.		()/1996	•			
2 Principal P	lace of Business	2a M	ailing Address				4	FEI No				Apr	lied For
21 21	lace of Dusiness	26	aming , taurous				*		671270				Applicable
Suite, Act.	#. etc.		uite, Apt. #, etc.				T				\$8.		Iditional
22	•	27					5.	Certifo	ate of Status Desired		Fe	e Re	uired
City & State	e		ity & State				6.	Election	n Campaign Financing		\$5	.00	/lay Be
23		28						Trust f	und Contribution		Ad	ided to	Fees
Zip	Cour try	Zi	р	Count	гу		8.	This c	orporation owes the cur	rrent year			
24	25	29		30					al Property Tax.		X Yes	6	No
	9. Name and Address of C	urrent Register	ed Agent				10.	Name	and Address of New	Registere	d Agent		
1077	CHICON DICHARD C			8	11	Name							
HUTCHISON, RICHARD C 2101 CORPORATE BLVD. NW				8	2	Street Addre	ess (P	O. Box	Number is Not Accept	table)		•	
	•												
	FLOOR			8	13								
ВОС	A RATON FL 33431			8	4	City					85	Zip C	ode
										<u>_</u>	<u> </u>		
11. Pursuant office or re	to the provisions of Sections 60 egistered agent, or both, in the	7.0502 and 607. State cf Florida	1508, Florida Statı Such change was	tes, the abo authorized b	ove-r	named corpo ne corporation	oration n's bo	n submi pard of	is this statement for the directors. I hereby acce	e purpose o ept the app	of changii ointment	ng its i as reg	egisterea istered
agent. I a	m familiar with, and accept the	obligat ons of, Se	ection 607.0505, FI	orida Statute	es.	•							
SIGNATUF:E										DATE			
	Signature, typed or printed name of register	red agent and title if app RS AND DIRECT		13.	geni s	signature req. ired			ONS/CHANGES TO O		אוח חופו	-CTO	2S IN 12
12. TITLE	PD	S AND DIRECT	□ DELETE	1.1 TITLE	=	$\overline{}$		יוועעני	ONS/OFFAROLO TO O	TIOLING	☐ Ch		☐ Addition
NAME	HUTCHISON, RICHARD C			1.2 NAME							_	•	
STREET ADDRESS	2101 CORPORATE BLVD.		ıΩR	B		DDRESS							
CITY-ST-ZIP	BOCA RATON FL	1111 41111120	· OIT	1.4 CITY-		1							
TITLÉ	STD		☐ DELETE	2.1 TITLE							☐ Ch	ange	Addition
NAME	KENNEDY, MATTHEW			2.2 NAME		Ì							
STREET ADORESS	0000001TF 0110	NW 4TH FLO	NR .			DDRESS							
CITY-ST-ZIP	BOCA RATON FL	1101 41111120	-011	2 4 CITY									
TITLE	BOOKINGOTTE				3.1 TITLE						☐ Ch	ange	Addition
NAME				3.2 NAME	É								
STREET ADDRESS				3.3 STRE	EETA	DDRESS							
CITY-ST-ZIP				3.4. CITY									
TITLE			☐ DELETE	4 1 TITLE							☐ Ch	ange	Addition
NAME				4 2 NAM	ŧE								
STREET ADDRESS				4.3 STRE	ETA	DDRESS							
CITY-ST-ZIP				4.4 CITY									
TITLE			☐ DELETE	5.1 TITLE		<del></del>					Ch	ange	Addition
NAME	,			5.2 NAMI	E								
STREET ADDRESS				5.3 STRE	EETA	ODRESS							
CITY-ST-ZIP				5.4 CITY	-ST-2	ZIP							
TITLE			☐ DELETE	6.1 TITLE	É						Ch	ange	Addition
NAME				6.2 NAMI	E								

CITY-ST-ZIP 14. I heret y certify that the information supplied with this filling 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 changer, or only a attact ment with an adgress, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS