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 # P96000059554 (1)

HALD BOADY & ASSOCIATES INC

FILED Apr 27 1998 8:00am Secretary of State

JIM D. BRADT & ASSOCIATES, INC.					
Principal Place	e of Business	Mailing Address	<u> </u>	(1801/1081 //10 /07/10 BARKI BURAI GURAI) W	INI BANAL OLLIR TAIRI BILAN BULL MIRI 1061
1525 N. SPRING HARBOR DRIVE 1525 N. SPRING HARBOR 1525N 1525N 1525N DELRAY BEACH FL 33445 DELRAY BEACH FL 3344		1525 N. SPRING HARBOR DRIVE			
			DO NOT WOLL	TINI TUUO ODA OE	
		13445	3. Date Incorporated or Qualified	E IN THIS SPACE	
				07/16/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1460	AUGUSTA CIR	26 H60 AUGU	STA CIR # 133	07-0345525	Not Applicable
Suite, Apt		Suite, Apt. #, etc.	 	6. Certificate of Status Desired	\$8.75 Additional
22	<u> </u>	27 133		C, Collineate of Otalds 203/100	Fee Required
City State		City & State	Rossell	6. Election Campaign Financing	\$5.00 May Be
23 01	LAM BENELL	28 DELAY	Вспен	Trust Fund Contribution	Added to Fees
24 Zp 3,3	145 25 PALM	3344	SQ PALM	This corporation owes or has participated Personal Property Tax due June	- · - ·
متار المحا	9. Name and Address of Current		[30] (775-7)	10. Name and Address of New Re	
BRADY, JIM D 81 Name					
	25 N. SPRING HARBOR DRIVE		82 Street Addr	ess (P.O. Box Number is Not Accepte	blo)
DELRAY BEACH FL 33445			92 20 44 VOO	ess (F.O. Box Number is Not Accepte	ole)
J			83		
İ			84 City		85 Zip Code
					FL S 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 of corporation's board of directors. I heraby accept the appointment as 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					
12.	Signature, typed or printed name of registered agent OFFICERS AND		(NOTE: Registered Agent signature require	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TITLE	ADDITIONS/OF ANGES TO OFF	Change Addition
NAME	BRADY, JIM D		1.2 NAME		_ ,
STREET ADORESS	1525 N. SPRING HARBOR DR.		1.3 STREET ADDRESS		İ
CITY-ST-ZIP	DELRAY BEACH FL 33445		1.4 CITY-ST-ZIP	•.	
TITLE		☐ DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELFTE	3.1 TITLE		Change Addition
NAME			3.2 NAME)
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP		DELETE	4.4 City-ST-ZIP		Change Addition
TITLE		FT DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		l
l l					ļ
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		occur	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ľ
CITY-ST-ZIP			6.4 CITY-ST-ZIP		l
	ertify that the information supplied with	h this titing does not quali		Section 119.07(3)(i). Florida Statutes.	further certify that the information

indicated on this annual report or supplies with this limit does not qualify not the exemption stated in Section 1.19.07(3)(), Florida Statutes. Truttler certify that the informatic indicated on 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 by an attachment with an address. B1-638-9225

SIGNATURE: