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FILED  
May 07 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000091307 (4)

1. Corporation Name

CANAL ASSOCIATES, INC.



Principal Place of Business

Mailing Address

5514 PARK BOULEVARD  
PINELLAS PARK FL 33781

5514 PARK BOULEVARD  
PINELLAS PARK FL 33781

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1996

4. FEI Number

59-3419680

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

JONES, CHRISTIE S  
1819 NEEDLES LANE  
LARGO FL

address change  
← only →

10. Name and Address of New Registered Agent

1 Name

JONES, CHRISTIE S

2 Street Address (P.O. Box Number is Not Acceptable)

126-212 AVE NORTHEAST

4 City

ST. PETERSBURG

FL

85

Zip Code

33704

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
HARDY, PETER J  
2950 TEAL LANE  
CLEARWATER FL 34622

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
HARDY, PATRICIA K  
2950 TEAL LANE  
CLEARWATER FL 34622

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
BRODERICK, ROGER B  
5514 PARK BOULEVARD  
PINELLAS PARK FL 33781

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
BRODERICK, SEAN M  
5514 PARK BOULEVARD  
PINELLAS PARK FL 33781

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 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: *[Signature]* Peter J Hardy PRBS 4/29/98 813 5734347

CR2E034 (10/97)