PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000097802

1. Corporation Name

HALLORAN AND COMPANY, INC.

							R ill Boill Brill is	/ILI 1888) I	TILL BRAID HERL CRAI
Principal Place	e of Business	Mailing Address							
5418 RUTLAND COURT ORLANDO FL 32812		5418 RUTLAND COURT ORLANDO FL 32812							
				DO NOT WRITE IN TH S SPACE					
						corporated or Qualifed	l		
						<u>/199</u> 7			
2. Principal P	lace of Business	2a. Mailing Address		-	4. FEI Nu			\sqcup	App ied For
21		26			<u>59-34</u>	79668			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired			\$8.75 Additional	
22 27					g, certifica			Fee	Required
City & S at	e	City & State			6. Election	ı Campa i gn Financing			00 May Be
23		28			Trust F	und Contribution		Add	ed to Fees
Zip	Country	Zip	Country	1	8. This co	rporation owes the cur			4
24	25	_ 29	30			al Property Tax.		<u> </u>	[ŽNo
	9. Name and Address of Currer	nt Registered Agent		1	10. Name	and Address of New	Registere d A	gent	
			81	Name					
PAPPAS, PETER C				Street A	ddress (P.O. Box	Number is Not Accep	table)		
225 E ROBINSON STREET			-						
	E 540		83						
ORLANDO FL 32801			84	City				85 Z	Zip Code
			04	City			FL		ip code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the state o	o Florida. Such change was ลบ tions of, Section 607.0505, Flori	ithonzed by ida Statutes	the carpoi	ration's board of c	irectors. I hereby acce	DATE		; registered
12.	OFFICERS AND DIRECTORS		13.			NS/CHANGES TO O	FFICERS ANI	D DIREC	CTOF S IN 12
TITLE	D	☐ DELETE	1.1 TITLE					☐ Chan	
NAME	HALLORAN, VIRGINIA C		12 NAME						1
STREET ADDRE 3S	5418 RUTLAND COURT		1.3 STREET ADDRESS						
CITY-ST-ZIP	ORLANDO FL 32812			T-ZIP					
TITLE	D	DELETE	2.1 TITLE		_			Chan	ge 🔲 Addition
NAME	WILLIAMS, KATHERIAN S	^	2.2 NAME	1					
STREET ADDRESS	TALE DUTY AND COURT		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32812		2.4 CITY-	1					Ì
TITLE		☐ DELETE	3.1 TITLE					Chan	ge Addition
NAME			3.2 NAME	1					
STREET ADDRE 3S			3 3 STREE	TADDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-ZIP					
TITLE		☐ DELETE	41 TITLE					Chan	ige Addition
NAME			4 2 NAME						1
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			4.4 CITY-S						
TITLE		☐ DELETE	5.1 TITLE	,	_			☐ Chan	nge
NAME			5.2 NAME					_	·
				TADDRESS					
STREET ADDRE IS			5.4 CITY- 5	1					ļ
CITY-ST-ZIP	1		0.4 0111-0						,

Thereby 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 cartify 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 receivar 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, with a Lother like empowered.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

TITLE

STREET ADDRESS

CITY-ST-ZIP

DELETE

☐ Change

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90132 029 ***150.00

Addition