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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90038 003 ***150.00

DOCUMENT # **P97000100518**1. Corporation Name

J.S. GERAGHTY, INC.

 	•••••

Principal Place	e of Business	Mailing Address		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1331 CHESAPEAKE AVENUE NAPLES FL 33962 1331 CHESAPEAKE AVENUE NAPLES FL 33962						
		DO NOT WRITE IN THIS SPACE				
				3. Date Incorporated or Qualif		
				11/24/1997		- 1
2: Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Apr	olied For
	4 HARBOR RD	26 2424 HAR	LBOK RD	65-0798330	· •	Applicable
Suite, Apt.		Suite, Apt. #, etc.			\$8.75 A	dditional
22	.,	27		5. Certifcate of Status Desired	Fee Rec	quired
City & State	e	City & State		6. Election Campaign Financia	ng \$5.00 i	May Be
23 NAP	ues fl	28 NAMES F	-L	Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the o		
24 3416	74 25	29 34104 3	o	Personal Property Tax.		□No "
	9. Name and Address of Current	Registered Agent		10. Name and Address of Ne	w Registered Agent	100
			81 Name	ESSICA SMIT	H-GERAGIA	77
	TH-GERAGHTY, JESSIE		82 Street Ad	Idress (P.O. Box Number is Not Acc		
	CHESAPEAKE AVENUE		<u> </u>	24 HARBOL I	3D	
NAP	LES FL 33962		83		•	1
			84 City		85 Zip C	Code
				APLES	FL "\rightagrage"	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-named co	prporation submits this statement for	the purpose of changing its	registered
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m_familiar_with, and accept the obligation	of Florida, Such change was auth ons of, Section 607.0505, Florid	orized by the corpora a Statutes.	ation's board or directors, i-nereby ac	cept me appointment as reg	Jistered
SIGNATURE						
SIGNATURE	Signature, typed or printed name of registered agent		egistered Agent signature requ		DATE	<u>@</u>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO		
TITLE	Р	☐ DELETE	1.1 TITLE	LESSICA SWILLING	EPACITY Dichange	/// Hydorgon 2
NAME	SMITH-GERAGHTY, JESSIE		1.2 NAME	2424 HARBOR	20	R2F034
STREET ADDRESS	1331 CHESAPEAKE AVE		1.3 STREET ADDRESS	- · · · · - · · · · · · · · · · · · · ·	FL 34104	Ĕ
CITY-ST-ZIP	NAPLES FL 33962		1.4 CITY-ST-ZIP	NAPLES		
TITLE		☐ DELETE	2.1 TITLE	N N	☐ Change	☐ Addition ☐ C
NAME			2.2 NAME			
STREET ADDRESS	}		2.3 STREET ADDRESS	•		j
CITY-ST-ZIP			2.4 CITY-ST-ZIP		·	
TITLE		. DEFELE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			Ì
STREET ADDRESS			3.3 STREET ADDRESS			- استبنیت شهر
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			ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		□ per cre	5.1 TITLE		- Change	☐ Addition
NAME		☐ DELETE				
		□ OEFFIE	5.2 NAME	•		l
STREET ADDRESS		□ OFFE IE	5.2 NAME 5.3 STREET ADDRESS	•		
		□ OFFEIF		,		
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	5.3 STREET ADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			☐ Addition
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change	Addition

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, with all other like empowered.

SIGNATURE: