

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 4: 18

DOCUMENT # **L50548** (1)

1. Corporation Name
BATES & DALY CO.

Principal Place of Business Mailing Address
%EDWIN BRAND 5061 SW 36TH ST.
5061 SW 36 ST FT. LAUDREDALE FL 33314
FT LAUDERDALE FL 33314
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **02/16/1990** 3a. Date of Last Report **02/03/1994**
4. FEI Number **65-0192456** Applied For
Not Applicable

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

5. Certificate of Status Desired **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRAND, EDWIN F
% BATES & DALY Co.
5061 S.W. 36TH ST.
FT. LAUDERDALE FL 33314

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 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 *Edwin F Brand Pres.* **Edwin F Brand Pres.** DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DPCT
NAME	BRAND, EDWIN
STREET ADDRESS	3896 TRACEWOOD LANE
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	VP
NAME	NELSON, ROBERT H., SR.
STREET ADDRESS	7901 NW 174TH TER
CITY-ST-ZIP	MIAMI FL
TITLE	VP
NAME	KINIRY, RUSSELL W.
STREET ADDRESS	5531 SW 58 CT
CITY-ST-ZIP	DAVIE FL
TITLE	S
NAME	CHERVENAK, JOHN M
STREET ADDRESS	8212 NW 91ST AVE
CITY-ST-ZIP	TAMARAC FL
TITLE	VPD
NAME	CLARK-RASSIAS, CECILY
STREET ADDRESS	7700 CEDARWOOD CIR.
CITY-ST-ZIP	BOCA RATON FL
TITLE	VPD
NAME	RASSIAS, JOHN N.
STREET ADDRESS	7700 CEDARWOOD CIR.
CITY-ST-ZIP	BOCA RATON FL

1.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	MARCELLE H. BLANK	
1.3 STREET ADDRESS	3896 TRACEWOOD LN	
1.4 CITY-ST-ZIP	BOYNTON BEACH, FL 33441	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *Edwin F Brand Pres.* **1/10/95** **305-591-4200**