

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 316567 (7)

1. Corporation Name  
**GEOPURE SYSTEMS & SERVICES, INC.**



Principal Place of Business: 2300 N.W. 71ST PLACE, GAINESVILLE FL 32606-1622  
Mailing Address: 2300 N.W. 71ST PLACE, GAINESVILLE FL 32606-1622

2. Principal Place of Business (21-24)  
2a. Mailing Address (26-30)  
City & State: Gainesville, FL  
Zip: 32653

3. Date Incorporated or Qualified: 05/09/1967  
3a. Date of Last Report: 04/17/1995  
4. FEI Number: 59-1166777  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$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  
**ROSZEL, DANIEL C.  
2300 NW 71ST PLACE  
GAINESVILLE, FL 32606**

10. Name and Address of New Registered Agent (81-85)  
Name: \_\_\_\_\_  
Street Address (P.O. Box Number is Not Acceptable): \_\_\_\_\_  
City: \_\_\_\_\_  
State: FL Zip Code: 32653

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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	COB	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSZEL, NORRIS O	1.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	1.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE FL	1.4 CITY-STATE-ZIP	
TITLE	PO	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSZEL, DANIEL C	2.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	2.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE, FL 0	2.4 CITY-STATE-ZIP	
TITLE	TD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBINSON, PAMELA R	3.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	3.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE, FL 0	3.4 CITY-STATE-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSZEL, SUE H	4.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	4.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE, FL 0	4.4 CITY-STATE-ZIP	
TITLE	SD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEEKS, JENNIFER R.	5.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	5.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE, FL 0	5.4 CITY-STATE-ZIP	
TITLE	VD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LORINCZ, ANDREW E DR	6.2 NAME	
STREET ADDRESS	2300 NW 71ST PLACE	6.3 STREET ADDRESS	
CITY-STATE-ZIP	GAINESVILLE FL	6.4 CITY-STATE-ZIP	

Secretary & Director  Change  Addition  
Treasurer & Director  Change  Addition

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 119.07(3)(-), 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 my address.

SIGNATURE: *Daniel C. Roszel* DATE: 4/3/96  
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR: *Daniel C. Roszel, President* (904) 376-7833 EXT #323

CR2E034 (12/95)