

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F72578**

(0)

1. Corporation Name

H.W. GAY ENTERPRISES, INC.



Principal Place of Business

P O BOX 6038
BOCA RATON FL 33427
US

Mailing Address

P O BOX 6038
BOCA RATON FL 33427
US

2. Principal Place of Business

21 **6314 LONGBOAT LN**

State Apt. #, etc.

22 **204 A**

City & State

23 **BOCA RATON, FL**

Zip

24 **33433**

Country

25 **US**

2a. Mailing Address

26

State Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

GAY, JR. H
22402 WESTCHESTER BLVD.
PT. CHARLOTTE FL 33980

3. Date Incorporated or Qualified

03/18/1982

3a. Date of Last Report

03/17/1995

4. FEI Number

59-2183935

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 has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

HERBERT W. GAY JR.

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

6314 LONGBOAT LN 204 A

83

84

BOCA RATON

FL

85

Zip Code 33433

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, 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]

1/17/96

12. OFFICERS AND DIRECTORS

12.1

NAME

12.2

STREET ADDRESS

12.3

CITY, STATE, ZIP

12.4

NAME

12.5

STREET ADDRESS

12.6

CITY, STATE, ZIP

12.7

NAME

12.8

STREET ADDRESS

12.9

CITY, STATE, ZIP

12.10

NAME

12.11

STREET ADDRESS

12.12

CITY, STATE, ZIP

12.13

NAME

12.14

STREET ADDRESS

12.15

CITY, STATE, ZIP

12.16

NAME

12.17

STREET ADDRESS

12.18

CITY, STATE, ZIP

13.

13.1

NAME

13.2

STREET ADDRESS

13.3

CITY, STATE, ZIP

13.4

NAME

13.5

STREET ADDRESS

13.6

CITY, STATE, ZIP

13.7

NAME

13.8

STREET ADDRESS

13.9

CITY, STATE, ZIP

13.10

NAME

13.11

STREET ADDRESS

13.12

CITY, STATE, ZIP

13.13

NAME

13.14

STREET ADDRESS

13.15

CITY, STATE, ZIP

14. I do hereby certify that the information supplied on this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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. I am an officer or director of the corporation or the treasurer 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] **HERBERT W. GAY JR.**

1/17/96 407-392-SKSK

CR2E034 (12/95)