

3/2/98 B-2727 C-  
**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Mar 02 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
**1998**



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

**DOCUMENT # F96000001523 (7)**  
 1. Corporation Name  
**GOUWS CAPITAL MANAGEMENT, INC.**

Principal Place of Business  
**511 CONGRESS ST  
 PORTLAND ME 04101**

Mailing Address  
**511 CONGRESS ST  
 PORTLAND ME 04101**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 [ ]  
 Suite, Apt. #, etc.  
 22 [ ]  
 City & State  
 23 [ ]  
 Zip  
 24 [ ]

2a. Mailing Address  
 26 [ ]  
 Suite, Apt. #, etc.  
 27 [ ]  
 City & State  
 28 [ ]  
 Zip  
 29 [ ]

Country  
 30 [ ]

3. Date Incorporated or Qualified  
**03/25/1996**

4. FEI Number  
**01-0396254**

Applied For  
 Not Applicable

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 owes or has paid the current year Intangible Personal Property Tax due June 30.  
 Yes  No

9. Name and Address of Current Registered Agent  
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
 1201 HAYS STREET  
 SUITE 105  
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 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 \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DCPT	<input type="checkbox"/> DELETE
NAME	GOUWS, JOHANN	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	WHITE, PAUL	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SIMPSON, JOHN	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MARSTON, GREGG	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GILBERT, CASS	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LEPAGE, MICHEL	
STREET ADDRESS	511 CONGRESS ST	
CITY-ST-ZIP	PORTLAND ME 04101	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CR2E034 (10/97)

207-774-3333

# GOUWS CAPITAL

Gouws Capital Management, Inc.  
Document Number F96000001523 (7)

## Line 12 - Officers and Directors - Additions to List

**DV**

Richard E. Curran, Jr.  
511 Congress Street, Suite 900  
Portland, Maine 04101

**DV**

Frank E. Kemna, Jr.  
511 Congress Street, Suite 900  
Portland, Maine 04101

**V**

Joan M. Smith  
511 Congress Street, Suite 900  
Portland, Maine 04101

**V**

Jan F. Macleod  
511 Congress Street, Suite 900  
Portland, Maine 04101