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Jan 17 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H83517 (3)

1. Corporation Name
GULF SIDE PLASTERING AND STUCCO, INC.



Principal Place of Business: 326 4TH AVENUE NORTH, SAFETY HARBOR FL 34695
Mailing Address: 326 4TH AVENUE NORTH, SAFETY HARBOR FL 34695-3633

3. Date Incorporated or Qualified: 10/31/1985
3a. Date of Last Report: 07/03/1996

2. Principal Place of Business (21) Suite, Apt #, etc
2a. Mailing Address (26) Suite, Apt #, etc

4. FEI Number: 59-2624816
Applied For: Not Applicable

22. City & State
27. City & State

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. Zip Country
28. Zip Country

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24. Zip Country
29. Zip Country
30. Zip Country

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

TRAAS, DONALD R.
326 4TH AVENUE NORTH
SAFETY HARBOR FL 33572

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 6 rows for officers and directors. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with a 'DELETE' checkbox.

Table with 6 rows for additions/changes. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with 'Change' and 'Addition' checkboxes.

14. I do 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: *Donald R. Traas* (Donald R. Traas)

Date: 1/17/97

CR2E034 (9/96)