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 # **P93000055423 (6)**

1. Corporation Name
GENESIS MARKETING & CONSULTING, INC.

Principal Place of Business
~~5120 JUNGLE PLUM RD~~ 22 S. TUTTLE AVE SUITE #4
SARASOTA FL ~~34242~~
US 34237

Mailing Address
~~5120 JUNGLE PLUM RD~~ 22. S. TUTTLE AVE SUITE #4
SARASOTA FL ~~34242~~
US 34237

3. Date Incorporated or Qualified: 08/04/1993
3a. Date of Last Report: 07/27/1995
4. FEI Number: 65-0429247 [ ] 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 has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

2. Principal Place of Business
21 22 S. TUTTLE AVE.
Suite, Apt. # etc.
22 SUITE #4
City & State
23 SARASOTA, FL
Zip / Country
24 34237 25

2a. Mailing Address
26 22 S. TUTTLE AVE.
Suite, Apt. # etc.
27 SUITE #4
City & State
28 SARASOTA, FL
Zip / Country
29 34237 30

9. Name and Address of Current Registered Agent
THOMPSON, WILLIAM B
5120 JUNGLE PLUM RD
SARASOTA FL 34242

10. Name and Address of New Registered Agent
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 or 617.0502, 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. ... I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of s. 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PS	[ ] DELETE
NAME	THOMPSON, WILLIAM B	
STREET ADDRESS	5120 JUNGLE PLUM RD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VPT	[ ] DELETE
NAME	THOMPSON, KAREN M	
STREET ADDRESS	5120 JUNGLE PLUM RD	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VPO	[ ] DELETE
NAME	THOMPSON, AMY R	
STREET ADDRESS	2937 BOUGAINVILLEA	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VPS	[ ] DELETE
NAME	THOMPSON, MICKEY	
STREET ADDRESS	1655 NORTH DR	
CITY-ST-ZIP	SARASOTA FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
2) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
3) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	324 SIESTA DR. SARASOTA, FL	[X] Change [ ] Addition
4) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
5) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition
6) TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] Change [ ] Addition

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 report or supplemental 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, with all other like empowered.

SIGNATURE: X Amy R. Thompson / Amy R. THOMPSON 3/29/96 9419532400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)