

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

3 APR 25 PM 1:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P94000006300 (5)**

1. Corporation Name

**GSBR SUNSET BEACH, INC.**

Principal Place of Business

Mailing Address

GLADES BLDG., SUITE 303  
877 EXECUTIVE CENTER DR.W.  
ST. PETERSBURG FL 33702

GLADES BLDG., SUITE 303  
877 EXECUTIVE CENTER DR.W.  
ST. PETERSBURG FL 33702

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

01/26/1994

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

Applied For

59-3224220

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARCARA, ERNEST L  
GLADES BLDG., SUITE 303  
877 EXECUTIVE CENTER DR.W.  
ST. PETERSBURG FL 33702

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

*Sandra B. Northam*  
Signature (Typed or printed name of registered agent, if applicable)

NOTE: Registered Agent signature required when registering.

*April 10, 1995*  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<del>VD</del>
NAME	MASCARA, ERNEST L
STREET ADDRESS	GLADES BLDG., 1303 877 EXECUTIVE CENTER DR.W
CITY - ST - ZIP	ST. PETERSBURG FL 33702
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	D/P/STP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Robert J. Sally	
1.3 STREET ADDRESS	2103 Gulf Drive	
1.4 CITY - ST - ZIP	Bradenton Beach, FL 34217	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	D/V	
2.2 NAME	Brian Burns	
2.3 STREET ADDRESS	2103 Gulf Drive	
2.4 CITY - ST - ZIP	Bradenton Beach, Florida 34217	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE	D/ST	
3.2 NAME	SALLY, KAREN	
3.3 STREET ADDRESS	2103 GULF DRIVE	
3.4 CITY - ST - ZIP	BRADENTON BEACH, FL 34217	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		
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	000001466400	
5.3 STREET ADDRESS	-04/27/95--01039--024	
5.4 CITY - ST - ZIP	***1800.00 ***200.00	
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 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)(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; 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:

*Robert J. Sally*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*March 10/95*  
DATE  
*813-7950*  
TELEPHONE #