## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra S. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500003244 (7)

JOHN T. GATTI & COMPANY, INC.

Principal Place of Business Mailing Address 41 ROSEDOWN BLVD. 41 ROSEDOWN BLVD. DEBARY FL 32713 DEBARY FL 32713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 59-3293757 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GATTI, JOHN T 41 ROSEDOWN BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) DEBRAY FL 32713 83 City Zip Code 85 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) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TiTLE GATTI, JOHN T NAME 1.2 NAME 41 ROSEDOWN BLVD. STREET ADDRESS 1.3 STREET ADDRESS **DEBARY FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETÉ Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

64 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 empored to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 and statutes.

6.1 TITLE 6.2 NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

That stores

DELETE

JOHN T. GATTI

6.3 STREET ADDRESS

4-20-22

403-668-7448

Addition

**FILED** 

Apr 27 1998 8:00am

Secretary of State