

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

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # **S39083** (8)

1. Corporation Name  
**GERAKE PROPERTIES, INC.**

Principal Place of Business: **3723 SPAINWOOD DR SARASOTA FL 34232**

Mailing Address: **3723 SPAINWOOD DR SARASOTA FL 34232**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business: **21 2530 Prospect St. Sarasota, Florida 34239**

2a. Mailing Address: **26 P.O. Box 25413 Sarasota, Florida 34277**

3. Date Incorporated or Qualified: **03/20/1991**

3a. Date of Last Report: **04/19/1994**

4. FEI Number: **59-3053361**

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:  Yes  No

9. Name and Address of Current Registered Agent: **POYE, GERALD K. 3723 SPAINWOOD DR SARASOTA FL 34232**

10. Name and Address of New Registered Agent:

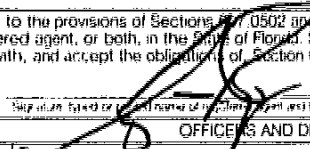
81 Name: \_\_\_\_\_

82 Street Address (P.O. Box Number is Not Acceptable): **2530 Prospect St.**

83 City: **Sarasota, FL 34239**

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:  DATE: **4.20.95**

| 12. OFFICERS AND DIRECTORS |                           | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---------------------------|---|--|
| TITLE                      | <b>P. POYE, GERALD K.</b> | 1.1 TITLE   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>POYE, GERALD K.</b>    | 1.2 NAME  |  |
| STREET ADDRESS             | <b>3723 SPAINWOOD DR</b>  | 1.3 STREET ADDRESS                                    | <b>2530 Prospect St.</b>   |
| CITY, ST, ZIP              | <b>SARASOTA FL</b>        | 1.4 CITY, ST, ZIP                                     | <b>Sarasota, FL 34239</b>  |
| TITLE                      |                           | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                           | 2.2 NAME  |  |
| STREET ADDRESS             |                           | 2.3 STREET ADDRESS                                    |  |
| CITY, ST, ZIP              |                           | 2.4 CITY, ST, ZIP                                     |  |
| TITLE                      |                           | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                           | 3.2 NAME  |  |
| STREET ADDRESS             |                           | 3.3 STREET ADDRESS                                    |  |
| CITY, ST, ZIP              |                           | 3.4 CITY, ST, ZIP                                     |  |
| TITLE                      |                           | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                           | 4.2 NAME  |  |
| STREET ADDRESS             |                           | 4.3 STREET ADDRESS                                    |  |
| CITY, ST, ZIP              |                           | 4.4 CITY, ST, ZIP                                     |  |
| TITLE                      |                           | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                           | 5.2 NAME  |  |
| STREET ADDRESS             |                           | 5.3 STREET ADDRESS                                    |  |
| CITY, ST, ZIP              |                           | 5.4 CITY, ST, ZIP                                     |  |
| TITLE                      |                           | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                           | 6.2 NAME  |  |
| STREET ADDRESS             |                           | 6.3 STREET ADDRESS                                    |  |
| CITY, ST, ZIP              |                           | 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)(b), Florida Statutes. I further certify that the information indicated on this 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, checked, and on an attachment with an address.

SIGNATURE:  **GERALD K. POYE** DATE: **4-20-95** TELEPHONE: **813-954-4663**