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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S64015

(8)

GEOFOCUS, INC.

Mailing	Address

1155 NW 13TH STREET GAINESVILLE FL \$2001

Principal Place of Business

2. Principal Place of Business

1155 N.W. 13TH ST.

2a. Mailing Address

GAINESVILLE FL 32601-4137

FILED Apr 18 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

08/14/1996

3. Date Incorporated or Qualified

07/03/1991

4. FEI Number

21			26						59-3073410		No	t Applicable
Suite, Apt.	Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	ı 🗀	\$8.75	
22	27							C. Continuate of dialay boshed	, <u> </u>	Fee Re	quired	
	City & State City & State							6. Election Campaign Financia	~	\$5.00		
23			[28]		<u>~_</u> _				Trust Fund Contribution		Added t	
Zip	i	Country	Zip		-	untry			8. This corporation has liability			199.032,
24		25 Address of Curre	29	ont .	30				Florida Statutes 10. Name and Address of New	Yes [
9, Name and Address of Current Registered Agent JENKINS, DWAIN 1155 NW 13TH ST., SUITE A GAINESVILLE FL 33601					81	Name		IV. Haine and Address of Net	v negistered	Agent		
					Tranic							
					82 Street Address (P.O. Box Number is Not Acceptable)							
					83							
											_	
						84	City			FI	85 Zip (Code
11. Pursuant	to the provisi	ions of Sections 607 056	12 and 607 1508	Florida Statuta	e tho s	hove	named	cornor	ration submits this statement for		f changing its	haroteinen s
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 Signature typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signal are required when renstating) DATE												
12,	Signature (jpdd		D DIRECTORS	. (101)	13.	zo rigiti		. regar ou	ADDITIONS/CHANGES TO C		DIRECTOR	S IN 12
TITLE	PD			DELETE	111	HLE		Γ			☐ Change	Addition
NAME	ITIN, THO	DMAS W.			1.2 N	IAME		ĺ				
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CITY - ST - ZIP	MEAT DI AOMETE DAM				1.4 (1.4 CITY-ST-ZIP						
TITLE	٧			DELETE	211			v			XX Change	Addition
NAME	JENKIN,	DWAIN			2.2 N	AME		1 4	nkins, Dwain			
STREET ADDRESS	1155 N.V	v. 13TH ST., SUITE /	4		2.3 \$	TREET	ADDRESS	115	55 NW 13th Street			
CITY-ST-ZIP	GAINES	ALLE FL			2.40	CITY-S	1 - 7IP	Gat	inesville, FL 326	501		
TITLE	\$			DELETE	311	HLE		S			L2 Change	Addition
NAME		, DALE J.			3.2 N	IAME		Zei	igler, Thomas			
STREET ADDRESS		.W. 72ND AVE.			3.3 S	TREET A	ADDRESS	700	0 NW 12th Avenue			ĺ
CITY-ST-ZIP	PORTLA	VD OR			3.4 (HY-S	I - ZIP	Dee	erfield Beach, FL	33442		
TITLE	D			DETETE	411	ITE		D.			XI Change	Addition
NAME		, THOMAS K.			4, 21	IAME			egler, Thomas			
STREET ADDRESS		. 13TH AVE.			4.3 S	TREF1 /	ADORESS		NW 12th Avenue			
CITY-ST-ZIP	DEERFIE	LD BEACH FL		Drugar		11Y - ST	- 71P	Dee	erfield, Beach, FL	33442	F Louis	-11100
TITLE				DELETE	5.1 T						L Change	Addition
NAME					5.2 N							
STREET ADDRESS	7	•			1		ADDRESS					
CITY-ST-ZIP				DELETE		ITY-ST	-ZIP				☐ Change	Addition
TITLE	DELETE			Dereit		61 TITLE					∟ unange	L AGO-OOT
NAME					62 N		naoror					
STREET ADDRESS							ADDRESS	}				{
14. I do hereb	ov cortifu that	the information supplie	d with this filing o	loes not pualif		OXEC		tated in	n Section 119.07(3)(i) Florida Sta	tutes I further	certify that t	he
16. 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 feed 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 or an attachment with an address.												