## 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 # V62336

(5)

G. WILLIKERS, INC.

## FILED Mar 31 1997 8:00am Secretary of State

	LIKERS, ING.	Mailing Addr	nec							
7113 S TAM		7113 S TAMIA								
SARASOTA		SARASOTA FL								
							3. Date Incorporated or Qualified 09/08/1992		of Last R 5/1996	eport
2. Principal Place of Business 2a. Mailing Ad			Address				4. FEI Number	- <u>I.,</u> -	Ar	plied For
21		26							t Applicable	
Suile, Apt #, etc. Suite, Apt #, e			1 #, e1c.				5. Certificate of Status Desired		<b>~</b>	Additional aguired
22 City & S	itate	City & Sta	ale		<del></del>	***************************************	6. Election Campaign Financing		\$5.00	· <del></del>
23		28					Trust Fund Contribution			to Fees
Zφ	Country	Zip		Count	'y		8. This corporation has liability for it		ax under s	. 199.032,
24	25	29		30					No	
	9. Name and Address of	Current Registered Age	nt		41		10. Name and Address of New Reg	gistered A	gent	
	DAMI, LARRY W			8	1 Nan	e				
7113 TAMIAMI TRAIL				8:	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)			
SF	ARASOTA FL 34231			ā	3				<del></del>	
				Ľ				····		···
				B	City			FL	85 Zip	Code
SIGNATUR	Signife en type d'or preified name of rege		(NOTE		gent s-gna	lure require	ed when reinstating)	DATE		
12,	OFFICE:	RS AND DIRECTORS	DELETE	13.		<del></del>	ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	RS IN 12 Addition
TRLE NAME	ADAMI, LARRY W	L.	] Deteri	1.1 TITLE 1.2 NAMI		ł			Unange	redition
STREET ADDRES	AGAS EIFATA DD				- et addres	s				
CITY-S1-ZIP	SARASOTA FL 34231			1.4 CITY		<u> </u>				
THE	V		DELETE	21 TITLE		<del></del>			Change	Addition
NAME	ADAMI, JAMES W			2.2 NAMI	<u>.</u>					
STREET ADDRES				2.3 STRE	ET ADDRES	s				
CITY-S1-749	SARASOTA FL 34238		1	2 4 CITY					<del></del>	
TITLE	ST	Ŀ	] DELETE	3.1 TITLE				L	Change	Addition
NAME STOCK CARGOS	ADAMI, MARY L ss   4176 ESCONDITO CIR			3.2 NAM		.				
STREET ADORE	SARASOTA FL			3.3 STRE 3.4. CITY	ET ADDRES	12	•			
TITLE			DELETE	4.1 TITLE		1-		τ	Change	Addition
NAME				4. 2 NAN				_	•	
STREET ADDRES	SS			4.3 STRE	ET ADDRES	s				
CITY-ST-7:P				44 City	-ST-ZIP					
10tF			DELETE	5 1 TITLE					Change	Addition
NAME				5.2 NAMI	Ξ	- 1				
STREET ADDRES										
C(TY+ST-7IP	ss				et addres	s				
	ss	<b></b>	1 prices	5.4 CITY	- \$T - ZIP	s	VIII-78	······································	106	Barne
TITLE	ss		] DELETE	5.4 CHTY 6.1 TITLE	- ST - ZIP	s		[	Change	Addition
TITLE NAME		C	DELETE	5.4 CITY 6.1 TITLE 6.2 NAM	- <b>ST - ZIP</b>		VIII-78	[	Change	Addition
TITLE			] DELETE	5.4 CITY 6.1 TITLE 6.2 NAM	- ST - ZIP E Et adores			[	Change	Addition

14. 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 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 3 if changed, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

LARRY W. ADAM

3-24-47

(94) 925-7665