## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

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	MENT n Name	# <b>G960</b>	15	(4)				
GENER	IC, INC.			• •			 	II AARN BYRII RHAN BIRHI BARY BARK BAR
Principal Place	e of Busines	S	Mailır	ng Address				
205 LAKE BLV	VD		205	LAKE BLVD				
SANFORD FL				FORD FL 32773				
							3. Date Incorporated or Qualified 04/04/1984	3a. Date of Last Report 06/12/1995
2. Principal Pl	lace of Busin	noss	2a. M	ailing Address			4. FEI Number	Applied For
21 Suite Ast	# ata		26	ta Ani ii ata			59-2402672	Not Applicable
Suite, Apt i	#, etc.		27	rte, Apt. # etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9			ty & State			6. Election Campaign Financing	55.00 May Be
23			28				Trust Fund Contribution	Added to Fees
Zıp 24		Country 25	29 Zı	p	30 Cour	ntry	8. This corporation has liability for i	intangible tax under s. 199 032, Yes
······································	9. Name	and Address of Curr	ent Register	ed Agent			10. Name and Address of New Re	gistered Agent
SHI	EPHARD, I	KENTON A.				81 Name		
		DLAND BLVD.				82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
DEL	LAND FL 3	2720			-	83		
						93		
						64 City		FL 85 Zip Code
11. Pursuant t office or re agent if ar	to the provis egistered ag m familiar wi	ions of Sections 607.05 jent or both, in the Sta ith, and accept the obli	502 and 607.1 te of Florida Sigations of Se	1508 Florida Stati Such change was ection 607.0505, F	ites, the abo authorized lorida Statut	ove-named corp by the corporat tes.	poration submits this statement for the purion's board of directors. Thereby accept	urpose of chariging its registered the appointment as registered
SIGNATURE								
	Stonature Ivoed	or printed name of registered a	agent acid title if an	ol cabb (Ne	OTE Beasterea	Altent Somature recu	ared when reast tran	()Alb
	Signature Types	or printed name of registered a OFFICERS A	agent acd total if an		OTE flugistered	Agent signature requ	and when reinstatings ADDITIONS/CHANGES TO OFFIC	DAIL DERS AND DIRECTORS IN 12
	PD	OFFICERS A	ND DIRECTO					
12.	PD GREENI	OFFICERS A	ND DIRECTO	ORS	13.	.E		CERS AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS	13. 1 1 Till 1 2 NA/ 1 3 S18	E ME REET ADORESS		CERS AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENI	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS DELETE	13. 11 Tell 12 NAJ 13 S18 14 Cell	E ME BEET ADORESS Y-ST-ZIP		DERS AND DIRECTORS IN 12  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS	13. 11 Tell 12 NA/ 13 STR 14 Cell 2 1 Tell	LE ME M		CERS AND DIRECTORS IN 12
TIZ.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS DELETE	13. 11 Tell 12 NAI 13 S19 14 Cell 2 1 Tell 2 2 NAI	LE ME FADORESS Y-ST-7/P LE ME		DERS AND DIRECTORS IN 12  Change Addition
12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS DELETE	13. 11 T/J 12 NA/ 13 SIA 14 C/T 21 T/J 22 NA/ 23 SIA	LE ME LEET ADDRESS Y - ST - 7/P LE ME LEET ADDRESS		DERS AND DIRECTORS IN 12  Change Addition
TIZ.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	ORS DELETE	13. 11 T/J 12 NA/ 13 SIA 14 C/T 21 T/J 22 NA/ 23 SIA	LE ME FADORESS Y - ST - 7/P LE ME TADORESS Y - ST - 7/P		DERS AND DIRECTORS IN 12  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE DELETE	13. 117:II 12 NAI 13 SIF 14 CIT 21 IIII 22 NAI 23 SIF 2 4 CIT	LE ME		Change Addition  Change Addition  Change Addition
12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE DELETE	13. 11 Till 12 NAI 13 SIF 14 Cif 21 Till 22 NAI 23 SIF 2 4 Cif 31 Till 32 NAI	LE ME		Change Addition  Change Addition  Change Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIF 21 TIII 22 NAI 23 STF 24 CII 31 TIII 32 NAI 33 STF	LE ME ME ME ME FELL ADDRESS Y - ST - 7/P ME ME ME ME FELL ADDRESS (Y - ST - Z/P ME ME		Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THE	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE DELETE	13. 11 Till 12 NAI 13 STF 14 CIF 21 TIII 22 NAI 23 STF 24 CII 31 TIII 32 NAI 33 STF	LE ME		Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAI 23 STF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NA	LE  ME  ME  ME  ME  ME  ME  ME  ME  ME		Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAI 23 STF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NAI 43 STF	LE ME		Change Addition  Change Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAI 23 SIF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NAI 43 STF	LE  ME  ME  ME  ME  ME  ME  ME  ME  ME		Change Addition  Change Addition  Change Addition  Change Addition  Addition  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAY 23 STF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NAI 43 STF 51 Till 51 Till	LE  ME  ME  ME  ME  ME  ME  ME  ME  ME		Change Addition  Change Addition  Change Addition
TIZ.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAY 23 STF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NA 43 STF 51 Till 52 NAI	LE  ME  ME  ME  ME  ME  ME  ME  ME  ME		Change Addition  Change Addition  Change Addition  Change Addition  Addition  Change Addition
TIZ.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 SIF 14 CIT 21 TIII 22 NAX 23 SIF 24 CIT 31 TIII 32 NAI 33 SIF 44 CIT 41 TIII 42 NA 43 SIF 51 TIII 52 NAI 53 SIF	LE ME		Change Addition  Change Addition  Change Addition  Change Addition  Addition  Change Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 SIF 14 CIT 21 TIII 22 NAX 23 SIF 24 CIT 31 TIII 32 NAI 33 SIF 44 CIT 41 TIII 42 NA 43 SIF 51 TIII 52 NAI 53 SIF	LE ME		Change Addition  Change Addition  Change Addition  Change Addition  Addition  Change Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 STF 14 CIT 21 TIII 22 NAY 23 STF 24 CIT 31 TIII 32 NAI 33 STF 34 CIT 41 TIII 42 NA 43 STF 51 Till 52 NAI 53 STF	LE ME		Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Addition  Addition  Change Addition
12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD GREENI 205 LAJ	OFFICERS A LEE, ROBERT F., JR KE BLVD	ND DIRECTO	DELETE  DELETE  DELETE  DELETE  DELETE	13. 11 Till 12 NAI 13 SIF 14 CIT 21 TILL 22 NAX 23 SIF 24 CIT 31 TILL 32 NAI 33 SIF 44 CIT 41 TILL 52 NAY 53 SIF 54 CIT 61 TILL 62 NAI	LE ME		Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Addition  Addition  Change Addition

further certify that the information yidd ated or this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 617, Florida Statutes, and that my name appears in Block 22 or Block 21 or an intachment with an address.

SIGNATURE: 1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR CIRECTOR

LOLL F. GREENLEE JR. SAESIDENT

467-323-6767