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FILED

Apr 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K72602 (1)

1. Corporation Name

GIBRALTAR NETWORK REALTY, INC.

Principal Place of Business

11576 A SAN JOSE BLVD.
JACKSONVILLE FL 32223
US

Mailing Address

4190 BELFORT RD.
STE. 475
JACKSONVILLE FL 32216-1458
US

3. Date Incorporated or Qualified

03/06/1989

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2960388

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEFFEY, FRED H
6620 SOUTHPOINT DR. SOUTH
STE 300
JACKSONVILLE FL 32216

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

Signature: type or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DP
SHERRER, LINDA H
4190 BELFORT RD., STE. 475
JACKSONVILLE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DCST
PETWAY, THOMAS I
4190 BELFORT RD., STE. 475
JACKSONVILLE FL 32216

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DAST
BOWER, E. B
4190 BELFORT RD., STE. 475
JACKSONVILLE FL 32216

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DEVP
MCGRUFF, W. A
4190 BELFORT RD., STE. 475
JACKSONVILLE FL 32216

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
HORNE, RONALD G
2594 FRANKLIN CT.
ORANGE PK. FL 32073

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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☐ 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 13 or changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EL Bruce Bower

4/14/97

904-296-6400

CR2E034 (9/96)