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

PROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT #**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(6)

FILED Apr 17 1998 8:00am Secretary of State

1. Corporation Name										
GENER	ial Equi	TY ASSOCIATES,	INC.							
								! }####################################		
Principal Place of Business Mailing Address										
· ·										
POST OFFICE BOX 12332 POST OFFICE BOX 12332 ST. PETERSBURG FL 33733 ST. PETERSBURG FL 33733										
								DO NOT WRITE IN THIS SPACE		
								3. Date incorporated or Qualified 01/29/1988	1	
2. Principal P	lace of Busin	ness	2a. Mailing	2a, Mailing Address				4. FEI Number Applied For		
21			26					59-2999018 Not Applicate	ole	
Sulte, Apt.	₩, Q (C.		├ - -¬	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required		
22 City & Stat	0		27]	City & State				6. Election Campaign Financing \$5.00 May Be	\dashv	
23			28	 				Trust Fund Contribution Added to Fees		
Zip	Zip Country		Zıp	Zip		Country		8. This corporation owes or has paid the current year Intangible		
24	25		29]					Personal Property Tax due June 30. Yes 🔀 No		
		and Address of Curre	nt Registered A	gent		81	Name	10. Name and Address of New Registered Agent		
	NOLD, RIC						Name			
5661 34TH STREET NORTH St. Petersbrug Fl 33714							Street A	Address (P.O. Box Number is Not Acceptable)		
SI. PETENSONUG FL 33/14				<u> </u>						
						City	FL 85 Zip Code			
11. Pursuant	to the provis	ions of Sections 607.05	02 and 607,1508	B. Florida Statu	tes, the at	OOVE	a-named o	corporation submits this statement for the purpose of changing its registere poration's board of directors. I hereby accept the appointment as registered	d	
agent. I a	m fam iliar wi	th, and accept the oblig	gations of, Section	n 607.05 05 , FI	orida Stat	utes	i.	poration's board of directors. Thereby accept the appointment as registered		
SIGNATURE	Closebus buod	or printed name of registured ag	and the day to the	Ja (810)	Fr. Danielasa			required when reinstating) DATE	_	
12.	Signature, typod		ND DIRECTORS	inci (NO	13.	Age	ini signature re	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	\dashv	
TITLE	PST			DELETE 1.1				☐ Change ☐ Addition	on	
NAME ARNOLD, RICHARD				1.2 NA						
STREET ADDRESS 5661 34TH ST. NORTH			1.3 S			REET	ADDRESS			
CITY-ST-ZIP ST. PETERSBURG FL							T-ZIP			
TITLE	D SIGNADO			☐ DELETE 2.				☐ Change ☐ Additio	٥n	
NAME				22 N						
STREET ADDRESS 5661 34TH ST. NORTH ST. PETERSBURG FL							ADDRESS		-	
CITY-ST-ZIP ST. PETERSBURG FL				DELETE		2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition		
NAME							1	Citalige Addition	""	
STREET ADDRESS				3.2 NA 3.3 ST			ADDRESS			
CITY-ST-ZIP					3.4. CITY-ST-ZIP					
TITLE				DELETE	4.1 TiT			Change Addition	on	
NAME					4. 2 NA	AME				
STREET ADDRESS				4.3 ST	4.3 STREET ADDRESS					
CITY-ST-ZIP					4.4 CIT	Y-S1	T - ZIP			
TITLE				DELETE	5.1 TIT			Change Addition	on	
NAME					5.2 NA					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP TITLE	_		v	DELETE	5.4 CIT		I - ZIP	☐ Change ☐ Addition	_	
NAME				L. DECETE	6.1 TIT 6.2 NA			Change Additiv	"	
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP						6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				
					5511		1			

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