

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

FILED  
Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000101468 (2)**

1. Corporation Name

**GUNNER'S ENTERPRISES, INC.**

Principal Place of Business

Mailing Address

**2832 ST. JOHN DRIVE  
CLEARWATER FL 34619**

**2832 ST. JOHN DRIVE  
CLEARWATER FL 34619**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/01/1997**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 <b>2519 McMullen-Booth Road - #510-272</b>	26 <b>2519 McMullen-Booth Road - #510-272</b>	<b>59-3415233</b>	<input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
City & State	City & State	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
23 <b>Clearwater, Florida 33761</b>	28 <b>Clearwater, Florida 33761</b>		
Zip	Zip		
24	25	29	30

9. Name and Address of Current Registered Agent

**MIZIO, ARMANDO F  
25400 U.S. 19 NORTH  
SUITE 210  
CLEARWATER FL 34623**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PTSD</b>	1.1 TITLE	<b>PSD</b>
NAME	<b>WHITE, PATSY E</b>	1.2 NAME	<b>Howell, Patsy E.</b>
STREET ADDRESS	<b>2832 ST. JOHN DRIVE</b>	1.3 STREET ADDRESS	<b>2519 McMullen-Booth Road - #510-272</b>
CITY - ST - ZIP	<b>CLEARWATER FL 34619</b>	1.4 CITY - ST - ZIP	<b>Clearwater, Florida 33761</b>
TITLE		2.1 TITLE	<b>VPTD</b>
NAME		2.2 NAME	<b>Howell, Paul L.</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>2519 McMullen Booth Road - #510-272</b>
CITY - ST - ZIP		2.4 CITY - ST - ZIP	<b>Clearwater, Florida 33761</b>
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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.

SIGNATURE: *Patsy E. Howell* **Patsy E. Howell** **02/10/98** **(813) 460-3110**

CR2E034 (10/97)