


4-30-97 B-5899 C
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 Apr 30 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 # 250047 (8)
 1. Corporation Name
 GORDON ATLANTIC, INC.



Principal Place of Business: 1005 ISLAND MANOR DR WEST PALM BEACH FL 33413 US
 Mailing Address: 1005 ISLAND MANOR DR WEST PALM BEACH FL 33413-2002 US

2. Principal Place of Business: 21 2867 ASHLEY DR W. #D WEST PALM BEACH, FL 33415 US
 2a. Mailing Address: 26 2867 ASHLEY DR W. #D WEST PALM BEACH, FL 33415 US

3. Date Incorporated or Qualified: 08/07/1961
 3a. Date of Last Report: 05/02/1996
 4. FEI Number: 59-0972981
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: GORDON, MILTON A. 1005 ISLAND MANOR DR WEST PALM BEACH FL 33413
 10. Name and Address of New Registered Agent: GORDON, MILTON A. 2867 ASHLEY DR. W. #D WEST PALM BEACH FL. 33415

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, HENRY L	1.2 NAME	
STREET ADDRESS	10 SUNSET LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH, FL 06000-	1.4 CITY-ST-ZIP	21R33062
TITLE	PD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, MILTON A.	2.2 NAME	GORDON, MILTON A.
STREET ADDRESS	1005 ISLAND MANOR DR	2.3 STREET ADDRESS	2867 ASHLEY DR. W. #D
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33415
TITLE	VT	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, HENRY L	3.2 NAME	
STREET ADDRESS	10 SUNSET LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH, FL 06000-	3.4 CITY-ST-ZIP	ZIP= 33062
TITLE	V	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORDON, BRUCE A	4.2 NAME	
STREET ADDRESS	777 CLAYTON	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO, CA 00000	4.4 CITY-ST-ZIP	ZIP 94117
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, changed, or on an attachment with an address.

SIGNATURE: Milton A Gordon MILTON A. GORDON 4/23/97 561/641-2079
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)