

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

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Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 301864 (5)

1. Corporation Name
GULF VIEW SQUARE FOOTACTION, INC.

Principal Place of Business

933 MACARTHUR BLVD
MAHWAH NJ 07430
US

Mailing Address

933 MACARTHUR BLVD
MAHWAH NJ 07430
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 9409 U.S. HWY 19 Suite, Apt. #, etc	26 7880 BENT BRANCH DR. Suite, Apt. #, etc
22 SP 6652669 City & State	27 SUITE 100 City & State
23 PORT RICHEY, FL Zip Country	28 IRVING, TX Zip Country
24 34668 25 USA	29 75063 30 USA

3. Date Incorporated or Qualified	02/09/1986
4. FEI Number	04-2398674
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P/D
NAME	ROBINSON, J M	1.2 NAME	RALPH T. PARKS
STREET ADDRESS	933 MAC ARTHUR BLVD	1.3 STREET ADDRESS	7880 BENT BRANCH DR #100
CITY-ST-ZIP	MAHWAH NJ	1.4 CITY-ST-ZIP	IRVING, TX 75063
TITLE	S	2.1 TITLE	V/D
NAME	LUCEY, EDWARD J	2.2 NAME	CHARLES M. ALBERT
STREET ADDRESS	67 MILLBROOK ST	2.3 STREET ADDRESS	7880 BENT BRANCH DR. #100
CITY-ST-ZIP	WORCESTER, MA 00000	2.4 CITY-ST-ZIP	IRVING, TX 75063
TITLE	VD	3.1 TITLE	S
NAME	ANDERSON, THEODORE L.	3.2 NAME	MARK W. MAYER
STREET ADDRESS	67 MILLBROOK ST	3.3 STREET ADDRESS	7880 BENT BRANCH DR. #100
CITY-ST-ZIP	WORCESTER, MA 00000	3.4 CITY-ST-ZIP	IRVING, TX 75063
TITLE	AS	4.1 TITLE	AS
NAME	BAHLMAN, GERALD	4.2 NAME	NANCY L. WINTON
STREET ADDRESS	933 MAC ARTHUR BLVD	4.3 STREET ADDRESS	7880 BENT BRANCH DR #100
CITY-ST-ZIP	MAHWAH NJ	4.4 CITY-ST-ZIP	IRVING, TX 75063
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:

CR2E034 (10/97)