

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

FILED

Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 309801 (9)

1. Corporation Name
HENRY S. GARTNER & ASSOCIATES, INC.

Principal Place of Business

235 CRAVEN STREET
NEW BERN NC 28560
US

Mailing Address

2470 N.E. 22ND ST.
P.O. BOX 50227
LIGHTHOUSE POINT FL 33062-3002



2. Principal Place of Business

21 N/A

Suite, Apt. #, etc. N/A

22 N/A

City & State N/A

23 N/A

Zip N/A

Country N/A

24 N/A

25 N/A

26 N/A

27 N/A

28 N/A

29 N/A

30 N/A

31 N/A

32 N/A

33 N/A

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57 N/A

58 N/A

59 N/A

60 N/A

61 N/A

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63 N/A

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65 N/A

2a. Mailing Address

26 235 CRAVEN ST

Suite, Apt. #, etc.

27

City & State

28 NEW BERN, NC

Zip

29 28560

Country

30 CRAVEN

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3. Date Incorporated or Qualified

10/07/1966

3a. Date of Last Report

04/17/1996

4. FEI Number

59-1154170

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

GARY R. PERDUE

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

310 CRAVEN ST

83

84 City

NEW BERN, NC

FL

85 Zip Code

28560

9. Name and Address of Current Registered Agent

BARNES, JOHN E JR
2470 N.E. 22ND ST.
POMPANO BEACH FL 33062

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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]* President 3-25-97
4-11-97

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* 2/19/97 6/16/97

CR2E034 (9/96)