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FILED  
Mar 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 309801 (9)

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

Principal Place of Business

Mailing Address

235 CRAVEN STREET  
NEW BERN NC 28560  
US

235 CRAVEN ST  
NEW BERN NC 28560  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/07/1966

2. Principal Place of Business

21 3313 HWY 70 EAST

Suite, Apt. #, etc.

22

City & State

23 NEW BERN, NC

Zip

24 28560

Country

25 CRAVEN

2a. Mailing Address

26 3313 HWY 70 EAST

Suite, Apt. #, etc.

27

City & State

28 NEW BERN, NC

Zip

29 28560

Country

30 CRAVEN

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  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

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

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

NOT REQUIRED

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME WILLIAMS, J. KENNETH  
STREET ADDRESS 2419 TRAM ROAD  
CITY-ST-ZIP NEW BERN NC

TITLE ☐ DELETE

NAME BARNES, JOHN E JR  
STREET ADDRESS 3101 NE 27TH AVENUE  
CITY-ST-ZIP LIGHTHOUSE PT, FL 00000

TITLE ☐ DELETE

NAME TAYLOR, ROBERT B JR  
STREET ADDRESS 9411 RAVEN HOLLOW RD  
CITY-ST-ZIP BRENTWOOD TN

TITLE ☐ DELETE

NAME HAMMACK, HENRY W 111  
STREET ADDRESS 4305 STEED TERRACE  
CITY-ST-ZIP WINTER PARK FL 32782

TITLE ☐ DELETE

NAME BARNES, JOHN E 111  
STREET ADDRESS P.O. BOX 5155  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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

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\*\*\*165.00

cc 3/17

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.

J Kenneth Williams