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Feb 18 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 # 454532 (3)

1. Corporation Name  
GASKIN ENTERPRISES, INC.



Principal Place of Business  
7171 N DAVIS HWY  
UNIVERSITY MALL  
PENSACOLA FL 32504  
US

Mailing Address  
8911 BURNING TREE ROAD  
PENSACOLA FL 32514-5610  
US

3. Date Incorporated or Qualified 06/11/1974  
3a. Date of Last Report 03/26/1996

2. Principal Place of Business  
21 7171 N. Davis Hwy  
UNIVERSITY MALL  
Pensacola, FL  
22 City & State  
23 32504  
24 Zip

2a. Mailing Address  
26 8911 Burning Tree Rd  
Suite, Apt. #, etc.  
27 Pensacola, FL.  
28 32514  
29 Zip  
30 USA

4. FEI Number 59-1538853  
Applied For  Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$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  
GASKIN, ALLENE B.  
8911 BURNING TREE ROAD  
PENSACOLA FL

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: Allene B. Gaskin - Allen B. Gaskin - President - Sec/Treas. 2-14-97  
Signature type:  Printed name of registered agent and file if applicable  Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE	
TITLE	P	GASKIN, ALLENE B	
NAME		8911 BURNING TREE RD	
STREET ADDRESS		PENSACOLA FL	
CITY - ST - ZIP			
TITLE	ST	GASKIN, ALLENE B.	
NAME		8911 BURNING TREE RD	
STREET ADDRESS		PENSACOLA FL	
CITY - ST - ZIP			
TITLE	V	SCHUMACHER, SHERRE G.	
NAME		8670 SCENIC HILLS DR.	
STREET ADDRESS		PENSACOLA FL	
CITY - ST - ZIP			
TITLE	V	GASKIN, SONYA RENEE	
NAME		140019 FOX RUN ROAD	
STREET ADDRESS		PENSACOLA FL	
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY - ST - ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE			
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: Allene B. Gaskin - Allen B. Gaskin 2-14-97 (904) 478-3800  
Signature and typed or printed name of signing officer or director Date Telephone #

CR2E034 (9/96)