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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 488459

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G & L MANUFACTURING INCORPORATED

Principal Place of Business	Mailing Address
409 CYPRESS ROAD	403 CYPRESS ROAD

FILED Apr 16 1998 8:00am Secretary of State



OCALA FL 34472 OCALA FL 34472 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/27/1975 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1631749 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 FINDLING, GARY **467 CYPRESS ROAD** 82 Street Address (P.O. Box Number is Not Acceptable) **OCALA FL 32672** 63 84 City 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1 1 TITLE Change Addition FINDLING, LESTER NAME 1.2 NAME 5491 S.E. 28TH RD. STREET ADDRESS 1.3 STREET ADDRESS **OCALA FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition FINDLING, GARY 2.2 NAME 5491 S.E. 28TH RD. STREET ADDRESS 2.3 STREET ADDRESS OCALA FL CITY-ST-ZIP 2. 4 CiTY - ST- ZIP DELETE TITL€ 3.1 TITLE Change Addition NAME FINDLING, LOUISE 3.2 NAME 5491 S.E. 28TH RD. STREET ADDRESS 3.3 STREET ADDRESS OCALA, FL 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 FITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-ZiP DELETE 5.1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 62 NAME STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 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.

LOUISE, FINDLING, SECRETARY,

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