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FILED
Mar 21 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 # 520489

(6)

1. Corporation Name

GESA PROPERTIES, INC.

Principal Place of Business

6952 N. ATLANTIC AVE.
CAPE CANAVERAL FL 32920

Mailing Address

6952 N. ATLANTIC AVE.
CAPE CANAVERAL FL 32920-3736

3. Date Incorporated or Qualified
12/16/1976

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

SALE, GERALD F.
6952 N. ATLANTIC AVE.
CAPE CANAVERAL FL 32920

4. FEI Number

59-2464559

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

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 of the person filing with this report and 11. If applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	SALE, GERALD F.	
STREET ADDRESS	6952 N. ATLANTIC AVE.	
CITY-STATE-ZIP	CAPE CANAVERAL FL	
TITLE	VP	☐ DELETE
NAME	SALE, JOYCE M	
STREET ADDRESS	6952 N ATLANTIC AVE	
CITY-STATE-ZIP	CAPE CANAVERAL FL	
TITLE	VP	☐ DELETE
NAME	Reynold Jason Davis	
STREET ADDRESS	6952 N ATLANTIC AVE	
CITY-STATE-ZIP	CAPE CANAVERAL FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	VP	☐ Change ☐ Addition
12 NAME	Reynold Jason Davis	
13 STREET ADDRESS	6952 N ATLANTIC AVE	
14 CITY-STATE-ZIP	CAPE CANAVERAL FL 32920	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-STATE-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-STATE-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-STATE-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-STATE-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-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:

Joyce Sale Joyce Sale

2-19-97 407-783-5860

Date

Daytime Phone #

0101700

CR2E034 (9/96)