## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



ANNU	PORATION AL REPORT 1996	Sandra B. Secretary DIVISION OF C	Mortham  of State		
DOCUN 1. Corporation	MENT # 63022	3 (6)			
GARD 8	ASSOCIATES, INC.				
Principal Place	of Business	Mailing Address			
7649 TALLOW TREE DRIVE 7649 TALLOW TREE DR ZEPHYRHILLS FL 33544 ZEPHYRHILLS FL 33544			E		
				3. Date Incorporated or Qualified 07/20/1979	3a. Date of Last Report 01/20/1995
2. Principal Pla	ace of Rusinese	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1930897	Not Applicable
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	This corporation has lability for Florida Statutes Yes     Name and Address of New R	□No
ZEPHYRH	LOW TREE DRIVE HILLS FL 33544  o the provisions of Sections 607.050; ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	2 and 607.1508, Florida Statules ida. Such change was authorized tion 607.0505, Florida Statutes.	84 City the above-named corporation's boa	oration submits this statement for the pur and of directors. Thereby accept the appr	FL 85 Zip Code  pose of changing its registered office ointment as registered agent. I am
	Signature, typed or printed name of registered ager		Registered Agent signature requir		CORP AND DIDECTORS IN 12
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	Change Addition
NAME STREET ADDRESS	PD GARD, GARY W 7649 TALLOW TREE DRIVE ZEPHYRHILLS FL		1 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST-ZIP		Change Addition 12 Change Addition 25 Addi
CITY-ST-ZIP TITLE NAME STREET ADDRESS	ZEFITI WIRES TE	C) OELETE	2 1 HTLF 22 NAME 23 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DEFFLE	2.4 CHY-SI-7IP 3.1 THEE 3.2 NAME 3.3 STHEET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREFT ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DEFEIE	4.4 CHY - S1 - ZIF 5.1 TITLE 5.2 NAME . 5.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP THTLE		DELETE	5 4 CHY-SI-ZIF 6 1 TITLE		☐ Change ☐ Addition

6.4 CITY - \$1 - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). 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 certify that I am an officer or director of the porporation 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 chapter, or on an accurate management.

€ 3 STREET ADDRESS

SIGNATURE:

STREET ACCRESS

CITY-ST-ZIP

GARY W. GARD

President JAN12, 96 813-973-1210