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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

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Jan 09 1997 8:00am

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Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 633668

(9)

GOERINGS' BOOK CENTER, INC.

Principal Place	of Business	Mailing Address		***************************************			
1310 W UNIVERSITY AVE 1310 W UNIVERSIT' GAINESVILLE FL 32603 GAINESVILLE FL 32							
CHINEDITES. 12 ORGO			•		3. Date Incorporated or Qualified 08/24/1979	3a. Date of Last Report 01/29/1996	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		·	59-1932150	Not Applicable	
Suite. Apt #	}	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	<u> </u>	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	·	8. This corporation has liability for in		
24	25	29	30			Yes No	
	9. Name and Address of Current R	egistered Agent			10. Name and Address of New Reg	istered Agent	
RAIN	IBOW, ELIZABETH		81	Name			
) W UNIVERSITY AVE. NESVILLE FL 32603		82	Street Addre	ess (P.O. Box Number is Not Acceptab	e)	
QAII'	AEGAIRTE LE GEORG		83				
			84	City		FL 85 Zip Code	
office or re	o the pravisions of Sections 607.0502 a egistered agent or both in the State of I n familiar with, and accept the obligation	Horida, Such change was a	uthorized by	the corporation			
SIGNATURE .	Segrande i typa diompera e fin casciel is disented agont ac		Registered Age	ent signature require		DATE	
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFIC		
TILLE	TS	☐ DELETE	1.1 TITLE			Change Addition	
SMAN	RAINBOW, ELIZABETH		1.2 NAME				
STREET ADDRESS	1418 N.W. 16TH TERR.		1.3 STREET				
CITY - ST - ZIP	GAINESVILLE, FL 00000	DELETE	1.4 CITY - S	T-ZIP		Change Addition	
TITLE	P DIDED THOMAS D		2 1 TITLE				
NAME DEDECT ADDRESS:	RIDER, THOMAS D 415 NW 19TH STREET		2.2 NAME	IDDAFFO			
STREET ADDRESS	GAINESVILLE, FL 00000		2.3 STREET				
CITY - S1 - ZIP TITLE	CANTESTILLE, I'L VOVOV	DELETE	2. 4 CITY - 1 3.1 THILE	S1-ZIP		Change Addition	
NAME		En piccie	3.2 NAME			E on ango	
STREET ADDRESS			3.3 STREET	ADDRESS			
CHTY-ST-7IP			3.4 CITY-				
TITLE		DELETE	4.1 TiTLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CiTY - ST - 74P			4.4 CITY - S	ST-ZIP			
TIFLE		DELETE	5.1 TITLE			☐ Change ☐ Addilion	
NAME			5.2 NAME				
STREET ADDRESS		•	5.3 STREET	ADDRESS			
CiTY+ST+7IP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY-S	ST - ZIP			
TITLE		☐ DELETE	63 THEE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREET	ADDRESS			
CITY-ST-7IP	·	Section and the section of the secti	64 CITY - S				
information Lam an of	ly certify that the information supplied w n indicated on this amount report or sup- freer or director of the corporation or the Block 12 or Block 13 if changed or or	olemental annual report is tri receiver or trustee empowe	ue and according to the control of t	urate and that	my signature shall have the same lega	l effect as if made under oath; tha	