FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 684190

1. Corporation Name

T.G.S. INC.

Principal Place of Business / Mailing Address

1031 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

3. Date Incorporated or Qualified: Aug. 15 1980
3a. Date of Last Report: 1995

2. Principal Place of Business
21: 1031 CAPE CORAL PKW
22: Suite, Apt. #, etc
23: City & State: CAPE CORAL FL 33904
24: Zip: 33904
25: Country: LEE

2a. Mailing Address
26: 1031 CAPE CORAL PKW
27: Suite Apt #, etc
28: City & State: CAPE CORAL FL 33904
29: Zip: 33904
30: Country: LEE

4. FEI Number: 59-2046628 ☐ 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

FRED C. NACHBRUNN
1031 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT SCHLEICHER, ANTON 1031 CAPE CORAL PKW CAPE CORAL, FL 33904 ☐ DELETE	1 1 TITLE / 1 2 NAME / 1 3 STREET ADDRESS / 1 4 CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY TREAS SCHLEICHER GABY 1031 CAPE CORAL PKW CAPE CORAL, FL 33904 ☐ DELETE	2 1 TITLE / 2 2 NAME / 2 3 STREET ADDRESS / 2 4 CITY ST ZIP	☐ Change ☐ Addition
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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)(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: Anton Schleicher Aug 6 1996 941 542-1174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #