

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 714735 (8)

1. Corporation Name

THE GATHERING INTERNATIONAL INC.



Principal Place of Business

2200 NW 2ND AVE.  
#201  
BOCA RATON FL 33431  
US

Mailing Address

2200 NW 2ND AVE.  
#201  
BOCA RATON FL 33431  
US

2. Principal Place of Business

2a. Mailing Address

21 4057 BOUGAINVILLEA RD

26 4057 BOUGAINVILLEA RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 BOYNTON BEACH, FL

28 BOYNTON BEACH FL

Zip

Country

Zip

Country

24 33436

25 PALM BEACH

29 33436

30 PALM BEACH

9. Name and Address of Current Registered Agent

FRIESEN, LAWRENCE J.  
1149 NW 13TH ST.,#2  
BOCA RATON FL 33432

3. Date Incorporated or Qualified  
06/11/1968

3a. Date of Last Report  
02/20/1995

4. FEI Number  
59-0940572

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  
FRIESEN, LAWRENCE J.

82 Street Address (P.O. Box Number is Not Acceptable)  
4057 BOUGAINVILLEA RD

83

84 City  
BOYNTON BEACH FL 85 Zip Code  
33436

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

*Lawrence J. Friesen*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME FRIESEN, LAWRENCE J.  
STREET ADDRESS 1149 N.W. 13TH ST.,#2  
CITY-ST-ZIP BOCA RATON FL

☐ DELETE

TITLE STD  
NAME BALOK, GARY  
STREET ADDRESS 1312 PERIWINKLE PL.  
CITY-ST-ZIP WELLINGTON FL

☐ DELETE

TITLE D  
NAME FRIESEN, WILLIAM  
STREET ADDRESS 24 ROSEMORE RD.  
CITY-ST-ZIP ST.CATHARINES,ONT.CAN.

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

11 TITLE PD  
12 NAME FRIESEN, LAWRENCE J.  
13 STREET ADDRESS 4057 BOUGAINVILLEA RD  
14 CITY-ST-ZIP BOYNTON BEACH, FL 33436

☒ Change ☐ Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Lawrence J. Friesen* LAWRENCE J. FRIESEN

3/8/96

407-374-9606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PS 3/13/96 CR2E037 (12/95)