

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90156 007 ***150.00

DOCUMENT # F16680

1. Corporation Name

FORT WALTON GOLD EXCHANGE AND PAWN SHOP, INC.

Principal Place of Business

% RONALD J GERSETH
92 S JOHN SIMS PARKWAY
VALPARISO FL 32580
US

Mailing Address

1214 HWY 98 E
FT WALTON BCH FL 33548
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1981

4. FEI Number

59-2045285

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 1214 Hwy 98 E

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

23 City & State

23 Ft. Walton Beach, FL

27 City & State

27 City & State

24 Zip Country

24 33548

25 Okaloosa

29 Zip Country

29

30

9. Name and Address of Current Registered Agent

INGRAM, DEE
1214 HWY. 98 EAST
FORT WALTON BCH FL 32548

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV ☐ DELETE

NAME WHITTEN, ROBERT G

STREET ADDRESS 2904 MACON RD

CITY-ST-ZIP COLUMBUS, GA 00000

TITLE DS ☐ DELETE

NAME FUNDERBURK, KENNETH

STREET ADDRESS 1ST ALABAMA BANK BLDG

CITY-ST-ZIP PHENIX CITY, FL 00000

TITLE DT ☐ DELETE

NAME GERSETH, RONALD J

STREET ADDRESS 1214 US HWY 98 EAST

CITY-ST-ZIP FT WALTON BCH, FL 00000

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I 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, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH L. FUNDERBURK

Date

Daytime Phone #

03/12/99 (334) 299-2900

CR2E034 (11/98)