## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F4

F47835

(6)

GERRYMAN, INC.

FILED Aug 20 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				1 santene eine einen 1000 i füren sinen Ante	alait aifit aiail alait alait aiatt iati
380 N. ORANGE AVE.		390 N. ORANGE AVE.			
SUITE 1290		SUITE 1290		DO NOT WRITE IN THIS SPACE	
ORLANDO FL 32801		ORLANDO FL 32801		3. Date Incorporated or Qualified	3a. Date of Last Report
				,	
5 Oringinal Di	ace of Business	2a. Mailing Address		10/07/1981 4. FEI Number	03/11/1996 Applied For
	ace of business	26. Walling Address		59-2575083	Not Applicable
Suite, Apt.	# ptc	Suite, Apt. #, etc.		-	SQ 75 Additional
22	w, 010.	27		5. Certificate of Status Desired	Fee Required
City & State	)	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	d the current year Intangible
24	25	29 30	<b>o</b>	Personal Property Tax due June 3	30. Yes No
	9. Name and Address of Current	Registered Agent		<ol><li>Name and Address of New Reg</li></ol>	lstered Agent
DEMPSEY, BERNARD H., JR. 81 Name					
1031 W. MORSE BLVD., SUITE 200				dress (P.O. Box Number is Not Acceptable	e)
WINTER PARK FL FL 32789			UZ SHOEL AU		2082
****	110111111111111111111111111111111111111		83		
					Int 7/2 Code
			84 City	- Sank	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		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	DP	DELETE	1.1 TITLE		L. Change L. Addition
NAME	GARCIA, GERLADINE R		1.2 NAME		
STREET ADDRESS	601 N NEW YORK AVE.		1.3 STREET ADDRESS		li li
CITY-ST-ZIP	WINTER PARK, FL 00000		1.4 CITY - S1 - ZIP		
TITLE	10	DELETE	2.1 TITLE		Change Addition
NAME	GARCIA, MANUEL A III		2.2 NAME		
STREET ADDRESS	601 N NEW YORK AVE.		2 3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK, FL 00000		2 4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	3 1 TITLE		Change Addition
NAME	BARKETT, R.		3.2 NAME		
STREET ADDRESS	601 N NEW YORK AVE.		3 3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		3 4. DITY-ST-ZIP		
TITLE	<u> </u>	DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-\$T-ZIP TITLE		DELETE	6.1 TITLE	4	Change Addition
1		ottoic	6.2 NAME		
NAME	·				
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-\$T-ZIP	and that the information armalian	with this filing does not qualify:	6.4 CITY-ST-ZIP	ed in Section 119 07/3Vi). Florida Statutes	I further certify that the

4. I do hereby certify that the information supplied with this filing doos 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 on tigged, or on an attachment with an address.