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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F53280

(6)

GALE GERARD, INC.

FILED
Jan 14 1997 8:00am
Secretary of State



					-{		AND OF BRADE BURN	1 8 8 1 1 1 	
Principal Place of Business Mailing Address						1 (60)100 (10) 0 (100)110 (10) 0 (10)	91911 B(B()	11841 A1811 A1811	1 61011 1061
C/O GALE D. GERARD C/O GALE D. GERARD									
125 FOREST		125 FOREST HILL BLVD WEST PALM BCH. FL 33							
WEST PALM BCH. FL 33405 WEST PALM BCH. FL 3340						3. Date Incorporated or Qualified 11/01/1981 3a. Date of Last Report 02/19/1996			
2. Principal f	Place of Business	2a. Mailing Address				4. FEI Number			pplied For
21		26			· 	59-2169703			lot Applicable
Suite, Apt. # etc 22 City & State 23		Sulle, Apt #, etc. 27 City & State 28			5. Certificate of Status Desired \$8.75 Addition Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees			\$8.75 Additional Fee Required	
Ζιρ	Country	Zip	Countr	У		8. This corporation has liability for			s. 199.032,
24	25	29	30	_			Yes		
^E	9. Name and Address of Curre	nt Registered Agent	81	Т-	Name	10. Name and Address of New Re	gistered	Agent	~======================================
	RARD, GALE D. 5 FOREST HILL BLVD.		L_						
-	ST PALM BCH. FL 33405		82	!	Street Addre	ess (P.O. Box Number is Not Acceptab	ile)		
	.011120000		83	+	J		· · · · · · · · · · · · · · · · · · ·		******
			1	1	Oit.			[an] 7:-	Cada
			84	'	City		FL	85 Zip	Code
SIGNATURE	Signarure Typoid or printed rame of registered as	orol and bile disposable (NON) ND DIRECTORS	OTE Registered Ag	en	nt signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS ANI	DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 TITLE		<u></u>	7,557,767,777,777,777		Change	Addition
NAME	GERARD, GALE D		1.2 NAME						
STREET ADDRESS			1.3 STREE	TΑ	address				
CHTY+ST+ZFF	W PALM BCH, FL 00000		1.4 CITY -	şr	r-ZIP				
TIFLE		LJ DELETE	2.1 TITLE					Change	Addition
NAME CIDELL LODGICS			2.2 NAME		• DDDECC				
STREET ADDRESS CITY-ST-ZIP			2 3 STREE			•			
TITLE		DELETE	3 7 TITLE				· ····································	Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T A	ADDRESS				
CITY-ST ZIP		Desert	3.4. CITY-		T-ZIP			<u> </u>	4.200
TITLE		☐ DELETÉ	4.1 TITLE					Change	☐ Addition
NAME STREET ADDRESS			4 2 NAME 4 3 STREE		ADDRESS				
City-St-Zip			43 SINCE						
TITLE		☐ DELETE	51 TITLE	.,,				Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			53 STREE	TA	address				
CITY - ST - 7IP			5.4 CITY-	ST-	- ZIP	~·····································			
TIFLE		☐ DELETE	6 1 TITLE		-			Change	Addition
NAME STORE LEGGES			6.2 NAME		A DDDCCC			•	
STREET ADDRESS			6.3 STREE		ı				

14. I do 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 aftechnique with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/97 382-1774