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PROFIT CORPORATION ANNUAL REPOR™



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

| GILLMORE-ROSS, INC. | | | | | A ADDICED NAME (BADIC BLACE ALIGNE IN | En Eln Bisk en | IBN BIBN BIBN | i 81814 81811 1881 |
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| rincipal Place of Business % FREDERICK GILLMORE. III | | Mailing Address * FREDERICK GILLMORE. III | | | | | | |
| 713 GULF BR | ieeze parkway F. Fl. 32561 | 713 GULF BREEZE PA GULF BREEZE FL 325 | | | | | | |
| OUL OILLES | | OUG BRICEE I'E GE | ~1 | | 3. Date Incorporated or Qualified 04/01/1982 | | e of Last R)2/14/19 | • |
| . Principal Plac | ce of Business | 2a, Mailing Address | | | 4. FEI Number | | | Applied For |
| | | 26 | | | 59-2180914 | | | Not Applicabl |
| Suite, Apt. #, | , etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | [] | | Additional Required |
| City & State | | City & State | | | 6. Election Campaign Financing | | | O May Be |
| | | 28 | , | | Trust Fund Contribution | LJ | Adde | d to Fees |
| Zip - | Country | Zip | Count | try | 8. This corporation has liability fo | | ax under s | 199.032, |
| | 25 9. Name and Address of Current | 29 Registered Agent | 30 | | Florida Statutes Ye 10. Name and Address of New | Benjetered | Agent | |
| | S. Hamo and Page 600 C. Control | . Hogistores rigori | | 31 Name | 10. 114110 4110 114110 | riog.otoroo | Agont | |
| CHIMO | RE, FREDERICK, III | | | 20 0: 14 | (D.O. Day Murch or in Not Accept | ab las | | |
| | F BREEZE PARKWAY | | 6 | 32 Street Ad | dress (P.O. Box Number is Not Accepta | able) | | |
| | REEZE FL 32561-1628 | | Ē | 33 | | | | |
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| or registere | trie provisions of Sections 607,0502 id Joent (or both, in the State of Florid | and 607.1508, Florida Statut a. Such change was authoriz | es, the above | e-named corp erporation's be | oration submits this statement for the poard of directors. Thereby accept the ap- | urpose of ch | anging its r | registered offi Lagent Lam |
| _ | MUNICA JULIUNE | | | | oration submits this statement for the p and of directors. I hereby accept the ap 4. red when reinstating) | urpose of ch pointment as - 8 - 9 | langing its r s registered | registered offi Lagent: Lam |
| IGNATURE . | of the provisions of Sections 607, 0902 digent for both, in the State of Florid pand adoept the dulgations of, Section digitature, typed or printed name of registered agent a OFFICERS AND | TRECE RICK (NC | | | oration submits this statement for the p and of directors. I hereby accept the ap ——————————————————————————————————— | - [8 - 4 | · | |
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oath; that I am an officer of director of the compration or the receiver or trustee en appears in Block 12 or Block 13 if changed, dipn an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

FREGERICK GILLWORC 4-18-96 NC904 932-3301
Date Date Proper