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Mar 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F86177 (5)

1. Corporation Name
G.C.M. BUSINESS CONSULTING, INC.

Principal Place of Business
117 9TH ST
BELLEAIR BCH FL 34635-3222

Mailing Address
117 9TH ST
BELLEAIR BCH FL 33786-3222



3. Date Incorporated or Qualified 06/22/1982
3a. Date of Last Report 02/08/1986

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 1620mcMullen Bosth	26 1620mcMullen Bosth	59-2197379	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 CLEARWATER, FL	28 CLEARWATER, FL	<input type="checkbox"/>	
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24 34619	25 Pinellas	29 34619	30 Pinellas

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MILLER, A. C. 119 9TH STREET BELLEAIR BEACH FL 34635	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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD MILLER, GARY C. 117 9TH STREET BELLEAIR BCH. FL	1.1 TITLE	Secretary
NAME		1.2 NAME	GARY C. MILLER JR.
STREET ADDRESS		1.3 STREET ADDRESS	117 9TH ST
CITY - ST - ZIP		1.4 CITY - ST - ZIP	BELLEAIR BCH FL 34635
TITLE	S PAPPAS, THOMAS C 12576 68TH ST N CLEARWATER FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	T RUZICKA, RANDALL 12576 68TH ST N CLEARWATER FL	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 attachment with an address.

SIGNATURE: Gary C. Miller Jr. 3/5/97 813 7268886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)