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PROFIT CORPORATION ANNUAL REPORT

1997



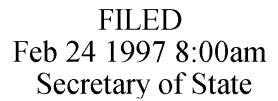
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000002225 (1)

GEO ASSOCIATES, INC.





Principal Place \$255 MARIGOLE GLEARWATER T	D-DRIV E	Mailing Address 9255 MARIOOLD DRIVE CLEARWATER FL 54521-2211				- NOBINGA TAIR IREBRETHET BOSHI OCHTE OTATA OCHTE BOTHA KIDIN TEAN FANN TAUN TUNI			
						 Date Incorporated or Qualified 05/12/1993 	3a. Date of t 04/11/19		
	lace of Business	2a, Mailing Address		O-	- 1	4. FEI Number		Applied For	
	HORELINE CIRCLE	26 3541 SHOR Suite, Apt. #, etc.	ELINE	CIRC	.cc	23-2226734		Not Applicable	
Suite, Apt.	#, tic	27 Saite, Apt. #. etc.		·		5. Certificate of Status Desired	1 1 7 7	.75 Additional ee Required	
City & State 23 PALN	HARBOR, FL	City & State 28 PALM HARBOR, FL				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip.	Cou			8. This corporation has liability for		· · · · · · · · · · · · · · · · · · ·	
₂₄ 3468	4 25 Pinellas	28 34684	30 Pi	nellas			Yes 🗌 No		
	g. Name and Address of Current	Registered Agent			1	0. Name and Address of New R	egistered Agent		
	IAFFEY, GEORGE W			81 Name					
	- MARIGOLD DRIVE-			82 Street	Address	(P.O. Box Number is Not Accepta	ible)		
GLE	ARWATER FL 34821			35	<u> </u>		CIRCLE		
				83					
				84 City			les l	Zin Code	
				PAL	-M-	HARBOR	FL "	34 684	
11. Pursuant	to the provisions of Sections 607.0503 egistered agent, or both, in the State in ternitar with, and accept the oblig	and 607 1508, Florida Statu	ites, the al	ove-named	corpora	tion submits this statement for the	purpose of chang	ging its registered	
agent. La	egistered agent, or both, in the state in terminar with, and accept the obligation	orrige was Ryns on√Se ction 607.0505, F	lorida Stat	o by the corp utes.	oration	s board or directors, I hereby acce	apt tue appointme	ent as registered	
SIGNATURE (Carago (D) An	JONGLEUM CIT	SORG	E W.		AHAFFEY	FEB. 19	1997	
SIGNATURE.	Signature, typical or winted name of registered aper			d Agent signature		hen reinstating)	DATE	·	
12	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI			
TITLE	CP	☐ DELETE	1.1 7)	rl e			⊠ Cr	ange Addition	
NAME	MAHAFFEY, GEORGE W		1.2 N	SME.	ŀ				
STREET ADDRESS	-8255 MARIGOLD DRIVE		1.3 \$1	REET ADDRESS	354	I SHORELINE C	IRCLE	_	
CITY-ST-ZIP	GLEARWATER FL 34621		1.4 CI	TY-ST-ZIP	PAL	M HARBOR FL			
TITLE	D	DELETE	217	TLE			XI CH	nange 🔲 Addition	
NAME	MAHAFFEY, JOANN K		2.2 N	ME					
STREET ADDRESS	9255 MARIGOLD DR		2.3 \$1	REET ADDRESS	354	I SHORELINE C	IRCLE		
CITY-ST-ZIP	OLEARWATER F L		2.40	ITY-ST-ZIP	PAL		L 3461	34	
TITLE		☐ DELETE	3.1 TI					ange Addition	
NAME			3.2 N	AME					
STREET ADDRESS			3.3 \$1	REET ADDRESS	[· ·	·		
CITY-ST-2IP			3.4.0	ITY-ST-ZIP					
10L f		☐ DELETE	4.1 1)		1		Cr	nange	
NAME			4.2 N	AME	1				
STREET ADDRESS				REET ADDRESS	Ī				
CITY-S1-ZIP			1	TY-ST-ZIP					
TITLE		DELETE	5.1 TI	····			☐ Cr	nange	
NAME			5.2 N				_ _		
STREET ADDRESS			. I	REET ADDRESS					
CITY - ST - ZIP				TY-ST-ZIP					
TITLE		DELETE	6.1 11		 		□ c+	ange Addition	
NAME			6.2 N		1		,		
STREET ADDRESS			- 1	REET ADDRESS					
CITY-SI-7iP			- 1		1				
				TY-ST-ZIP	<u> </u>	Section 119.07(3)(i), Florida Statut			

renormation 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 atlachment with an address.

W. MAHAFFEY 2/19/77 813-789-474