

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # F98000004848

1. Entity Name
THE GEMESIS CORPORATION



Principal Place of Business
**7040 PROFESSIONAL PKWY EAST
SARASOTA, FL 34240**

Mailing Address
**7040 PROFESSIONAL PKWY EAST
SARASOTA, FL 34240**



03112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3423268

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$0.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000385352
04/18/08-80009-019 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PM LUX, STEPHEN 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WAGNER, BERNARD 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BUFFETT, THOMAS V 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HICKS, WAYLAND 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLETT, DWAIN 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, JERRY 7040 PROFESSIONAL PKWY EAST SARASOTA, FL 34240

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bernard G. Wagner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/08

Date

Daytime Phone #

941-907-9889