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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # G49968 1. Corporation Name

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90139 031 ***150.00

GADDIS	CORPORATION				
Principal Flace	of Business	Mailing Address			4 B1841 B1811 B1841 A1811 A1811 (621
P.O. BOX 950 NEW RIVER STATION P.O. BOX 950 NEW RIVER ST FT LAUDERDALE FL 33302 FT LAUDERDALE FL 33302			STATION	DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualifed 07/28/1983	
		To Mailing Addrson		4, FEI Number	Applied For
	ace of Business	2a. Mailing Address		59-2310999	No: Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc.		39 23 10999	\$8.75 Additional
	m, etc.	27		5. Certifcate of Status Desired	Fee Re juired
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This exporation owes the current year I	ntangible
24	25	29	30	Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
CAMILLO, JOHN, M 1600 W COMMERCIAL BLVD FT LAUDERDALE FL 33309			81 Name 82 Street Add 22/ 83	ress (P.O. Bo): Number is Not Acceptable) W. O. AKLAND YAR K	BLUD.
			84 City	ADSENDALE F	85 Zip Code
Office or re	edistared agent, or both, in the State (rf Florida. Such change was at	ithorized by the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its registered
agent. I a	m familiar with, and accept the obligat				
	Signature, typed or printed name of registered agent		Registered Agent signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS.	NO DIDECTOUS IN 12
12.	OFFICERS ANI	DELETE	13. 11 TITLE	ADDITIONS/CHANGES TO OFFICERS.	Change Addition
TITLE	GADDIS, JESSE P		1.2 NAME		
NAME	517 N FED HWY		1.3 STREET ADDRESS		
STREET ADDRESS	FT LAUDERDALE, FL 00000				
CITY-\$T-ZIP	D	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE	GADDIS, MICHAEL R.		2.2 NAME		_ , _
NAME	517 N. FED. HWY.		2.3 STREET ADDRESS		
STREET ADDRESS	FT LAUDERDALE FL		2.4 CITY-ST-ZIP		
CITY-ST-ZIP	VD VD	☐ DELETE	31 TITLE		Change Addition
NAME	MORGAMAN, PHILIP E.	_	3.2 NAME		
STREET ADDRESS	1600 W COMMERCIAL BLVD		3.3 STREET ADDRESS		
	FT LAUDERDALE FL		34 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	TO COLIONAL TE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07.33(i), Florida Statutes. I further cartify 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 receivar 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, with all other like empowered.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)