

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **G58158** (8)

1. Corporation Name

GENESIS FOREVER, INC.

Principal Place of Business
**1300 WEST NORTH BLVD.
LEESBURG FL 34748**

Mailing Address
**1300 WEST NORTH BLVD.
LEESBURG FL 34748**

APPROVED
AND
FILED

50 MAY -1 AM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
09/01/1983

3a. Date of Last Report
09/14/1994

4. FEI Number
59-2886164

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip

25. Country

26. Mailing Address

27. Suite, Apt. #, etc.

28. City & State

29. Zip

30. Country

9. Name and Address of Current Registered Agent

**DEDALIS, SANDRA A
1300 WEST NORTH BLVD.
LEESBURG FL 34748**

10. Name and Address of New Registered Agent

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 607.01(5)(c) and 607.14(1)(b), 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, chairman, or the appointment as registered agent. I am authorized to file and accept the submission of this statement under Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

(Date)

12. OFFICERS AND DIRECTORS

OFFICER	NAME	STREET ADDRESS	CITY	STATE	ZIP
PT	DEDALIS, SANDRA A	1119 SUNSHINE AVENUE	LEESBURG	FL	34748

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICER	NAME	STREET ADDRESS	CITY	STATE	ZIP	Change	Addition
1						☐	☐
2						☐	☐
3						☐	☐
4						☐	☐
5						☐	☐
6						☐	☐
7						☐	☐
8						☐	☐
9						☐	☐
10						☐	☐
11						☐	☐
12						☐	☐
13						☐	☐
14						☐	☐
15						☐	☐
16						☐	☐
17						☐	☐
18						☐	☐
19						☐	☐
20						☐	☐

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(1)(b), Florida Statutes. Further, I certify that the information included on the 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 make 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: *Sandra A. Dedalis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/95 904-323-8115
(Signature of Secretary of State)