

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **G61000** (7)

1. Corporation Name

GORDON-KERCKHOFF PRODUCTIONS, INC.



Principal Place of Business

**6003 28TH ST E
STE. C-1
BRADENTON FL 34203
US**

Mailing Address

**3351 W. ANDREWS DR., NW.
ATLANTA GA 30306
US**

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
25		30	

9. Name and Address of Current Registered Agent

**STAHR, MICHAEL
207 HAVERKOS CT.
HOLMES BCH. FL 34217**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0102 and 607.1504, 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of the person who is authorized to sign this report on behalf of the corporation)

(Signature of the person who is authorized to sign this report on behalf of the corporation)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	PT	[] DELETE
2. NAME	FLOETHE, RONALD K	
3. STREET ADDRESS	3351 WEST ANDREWS DR NW	
4. CITY, ST, ZIP	ATLANTA GA	
5. TITLE	VS	[] DELETE
6. NAME	WHEELER, LINDA M.	
7. STREET ADDRESS	3351 WEST ANDREWS DR NW	
8. CITY, ST, ZIP	ATLANTA GA	
9. TITLE		[] DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		[] DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		[] DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13.

1. TITLE	[] Change [] Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	[] Change [] Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	[] Change [] Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	[] Change [] Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	[] Change [] Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

7001001750017
-03/26/96-01030-013
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption in Section 119.07(3)(g), 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 or person in power 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96 404/237-1722

CR2E034 (12/95)