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

PROFIT CORPORATION ANNUAL REPORT

1998



G93569

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(3)

APPROVEL AND

98 APR 20 AM 10: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business

DOCUMENT #

GERDON, INC.

1300 PAUL RUSSELL RD., N. TALLAHASSEE FL 32301

Mailing Address

1300 PAUL RUSSELL RD., N. TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualified	
					03/28/1984	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			59-2406814	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Count	гу	8. This corporation owes or has paid the curr	
24	25	29	30		, and a second s	Yes No
	9. Name and Address of Curren	t Registered Agent		er ::	10. Name and Address of New Registered A	gent
ATKINSON-HAZELTON, GERI				1 Name		
1300 PAUL RUSSELL ROAD, NORTH			6:	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
į tai	LLAHASSEE FL 32301					
			8:	3		
			84	4 City		85 Zip Code
			6	City	FL	2.1p Odds
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the abo	ve-named co	orporation submits this statement for the purpose of	changing its registered
office or re	egi ste red agent, or both, in the State m f a miliar with, and accept the obliga	of Honda. Such change was ations of, Section 607,0505, Fl	authorized t Iorida Statuti	by the corpores.	ration's board of directors. I hereby accept the appo	as registered
1	The state of the s					
SIGNATURE .	Signature, typed or printed name of registered age	ot and the if applicable (NO	TE: Registered A	gont signature rec	quired when reinstating) DATE	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	VTD	☐ DELETE	1.1 TITLE		ļ	Change Addition
NAME	ATKINSON-HAZELTON, GERI		1.2 NAME		6000024951	la65
STREET ADDRESS	1300 PAUL RUSSELL RD. N		1.3 STREI	FT ADDRESS	-04/21/9801	i047~011
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CHY-	-ST-ZIP	****150.00	****150.00
TITLE	PSD	DELETE	2.1 TITLE			Change Addition
NAME	HAZELTON, DON F.		2.2 NAME			
STREET ADDRESS	1300 PAUL RUSSELL RD. N		2.3 STREI	ET ADDRESS		
CITY-ST-ZIP	TALLAHASSEE FL		2 4 CITY	- S7 - ZIP		
TITLE		DELLETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	FT ADDRESS		
CITY-ST-ZIP			3.4. City	4		•
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	f		-
STREET ADDRESS				E1 ADDRESS		
			4.4 CITY			
CITY-ST-ZIP		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME		,	_ ,
1				ET ADDRESS		
STREET ADDRESS						
CITY-ST-ZIP		DELETE	5.4 CITY - 6.1 TITLE			Change Addition
TITLE		_ WHEE				
NAME			6.2 NAME		b, 7/V	ω
STREET ADDRESS			6.3 STREI	ET ADDRESS	. ~ 1	

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 logal 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 attachment with an address.