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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

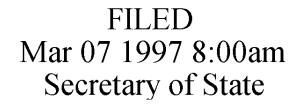
DOCUMENT # H07007

(8)

GARY LAPIERRE, INC.

Principal Place of Business

Mailing Address





10130 BEACH BLVD JACKSONVILLE FL 32216		10130 BEACH BLVD JACKSONVILLE FL 32246-4710 US					
					3. Date Incorporated or Qualified 06/07/1984	3a. Date of Last R 03/05/1996	'
2. Principal Place of Business		a. Mailing Address	. /	nn	4. FEI Number	Ap	plied For
21 548 Bayridge	Rd 2		ridge	184	59-2420969	·	t Applicable
Suite, Apt. #, etc	2	Suito, Apt #, etc.			5. Certificate of Status Desired	See Re	
City & State 23 Jan Ksonville 7	florida 21	28 Jacksonville			6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe		
24 300/10 25	Ouval 2	30214	Countr	vd		Yes 🔀 No	. 199.032,
er tale a company of the company of	dress of Current Reg	jistered Agent		Τ	10. Name and Address of New Re	distered Agent	
OBERDORFER, E. C			81	Name			-
1719 BLANDING BLVD. JACKSONVILLE FL 32210				82 Street Address (P.O. Box Number is Not Acceptable)			
			83	1			
			84				Code
office or registered agent, or to agent. Earlifandlar with land a	oth, in the State of File	orida. Such change was i	authorized b	v the corporat	poration submits this statement for the p lion's board of directors. I hereby accep	urpose of changing it the appointment as	s registered registered
SIGNATURE Signature typic for purior	or registered agent and	tit cut applicable (NO	1E: Registered Ac	ent signature requir	red when reinstating)	DATE	
12.	OFFICERS AND DIF	ECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
TILE PD		DELETE	1.1 TOTALE			☐ Change	Addition
NAME LAPIERRE, GA			1.2 NAME				
STREET ADORESS 10130 BEACH			1.3 STREE	T ADDRESS			
CIDY-SUZIF JACKSONVILLI			1.4 CITY -	ST-ZIP			
mu PD		☐ DELETE	21 TITLE			☐ Change	Addition
NAME Lapier	e Gary Suyridge	n d	22 NAME				
SPREET ADDRESS 598	wyridge	711	23 STREE	T ADDRESS			
	+/ 300		2 4 CITY	ST-ZIP			
111.6		☐ DELETE	31 TITLE			Change	Addition
NAME			3 2 NAME				
STREET ADDRESS				T ADDRESS			
- CHY-S1 201		DELETE	3.4. CITY -	SI-ZIP		Change	Addition
NAME.		LJ becere	4 2 NAMI			C) Change	L] Addition
STREET ADDRESS				T ADDRESS			
CELY-SI-7 F			4.4 CHY-				ĺ
Lill		DELETE	5 1 TITLE		Mark Mark and the second secon	☐ Change	Addition
NAME			5.2 NAME			.— •	
STREET ADORESS				T ADDRESS			
CHY-S1 70F			5.4 CiTY -				
MLE	· · · · · · · · · · · · · · · · · · ·	DELETE	61 TITLE			Change	Addition
NAME			62 NAME]
STREET ADDRESS		•	63 STREE	T ADDRESS			
CHY ST 711			64 CITY -				
14. I do hereby certify that the information indicated on this a	ormation supplied with	this filing does not qual	ify for the ex	emption stated	d in Section 119.07(3)(i), Florida Statutes	s. I further certify that	the

Tan at officer or director of the corporation supplies report is true and accorded and matrify signature shall have the same legal effect as it made under of Tan at officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Stalutes; and that my name appears in Block 12 or Block 13 changed, or op an attachment with an address.

904-724-0829