SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPOPATION ANNUAL REPORT 1999

DOCUMENT #

W: S. GASTON, INC.

1. Corporation Name



H08369

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED

oo JUL 13 AH 9:00

PATALOSEE. FLORIDA



Principal Place of Business Mailing Address 997 N. COLLIER BLVD. P.O. BOX 344 MARCO ISLAND FL 33969 MARCO ISLAND FL 39937 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/07/1984 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2515093 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Ζıp Country 8. This corporation owes the current year Intangible Personal Property. 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HAUSLER, GARY J ESQ Street Address (P.O. Box Number is Not Acceptable) 601 ELKCAM CIRCLE, #B-3 MARCO ISLAND FL 33937 83 Ziri Code 84 City 85 FL 11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable CR2E034 (5/99) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 1.5 TITLE Change Addition TYTLE DELETE 1.2 NAME NAME GASTON, WILLIAM R. 1064 FIELDSTONE DR. 1.3 STREET ADDRESS STREET ADORESS MARCO ISLAND FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition Addit DELETE 2 I TITLE GASTON, SUSAN G 22 NAME NAME 1064 FIELDSTONE DR. 23 STREET ADDRESS STREET ADDRESS ****150.00 ****150.00 MARCO ISLAND FL 24 CITY-ST-ZIP CITY-ST-ZIP Addition 3 1 TITLE Change TITLE DELETE MERSCH, STEPHEN 3 2 NAME NAME WREN CT. 3 3 STREET ADDRESS STREET ADDRESS MARCO ISLAND FL 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 51 TITLE DELETE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE Change TITLE DELETE 62 NAME NAME 6 3 STREET ADDRESS STREET ADORESS 64 CITY-ST-ZIP 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(3)(i), Florida Statutes. I further certify that the information suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outplication and officer or director of the corporation of 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.



P.O. Box 344 Marco Island, Florida 34146

July 7, 1999

Division of Corporations Attn: Annual Report Filing P.O. Box 6327 Tallahassee, FL 32314

To the person in charge:

Our records indicate that this fee was paid in a timely manner. I have attached a new check for \$150.00 and a completed "Second notice" form.

Respectfully,

William R. Gaston

President

Voice: 941/642-4545 Fax: 941/394-4895 www.marcocable.com E-mail: marcocable@aol.com