FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90056 046 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H43411

GOLDEN GAVEL AUCTIONEERS, INC.

	•												
Principal Place	of Business	Ma	ailing Addres	ss				7	I TORRUGUE PIET BERNO ILLEI GE	981 11881 17 6 2 4	1911 91915 \$1851		1811 WIBIT 1991
8504 ADAMO D	PRIVE	105	5 US HWY 30	HTUOS IC					•				
TAMPA FL 33619			STE. E					Ì	DO NOT WRITE IN THIS SPACE				
US		TAN US	MPA FL 3361 :	9				3	Date Incorporated or Qual		TIIS OF ACI		
		UU						3.	02/19/1985				
2 Principal Pl	lace of Business	22	Mailing Add	drace				- 4.	U2 13 1300 FEI Number			Anr	plied For
	lace or prizings?	26	Maining Acc	11000					59-2540895				t Applicable
Suite, Apt.	# etr	120	Suite, Apt.	# etc.				-+			\$8.	 _	dditional
22	<i>#</i> 1,010.	27	06.00, 1 4	"1 0.0.				5.	. Certifcate of Status Desire	ed 🗆	7	-	quired
City & State	<u> </u>		City & State		.,,			6.	. Election Campaign Finance	ina —	\$5	00	May Be
23		28	C,	-				•.	Trust Fund Contribution	,,,,i,d			o Fees
Zip	Country		Zip		Cour	ntry		8.	This corporation owes the	current yea			
24	25	29			30	•		•	Personal Property Tax.	· · · · · · · · · · · · · · · · · · ·	☐ Ye		∏No
	9. Name and Address of Curre		tered Agent	t				10.	. Name and Address of N	ew Registe	red Agent		
						81	Name			-			
HARI	ROW, ANDREW M.				1	-	75 A 844	· (D	> C D Norman in Not Ann				
	SEABIRD WAY					82	Street Add	iress (r	P.O. Box Number is Not Acc	ceptable)	,		
- APOI	LLO BCH. FL 33570				ŀ	83							37. 35. 4. 7
ing the State						. <u></u>			HER TOTAL SERVICE		1 1 2	ž ·	10.1
	المراز المراز المراز المراز المستعلق المرازية			• • • • • • •		84	City	· . t* ·		å.,	85	Zip C	Code
V.	to the provisions of Sections 607.05	:02 and 60	07 1508 Flo	rida Statut	es the ah	** ·	named corr	Doration	n submits this statement for	the nurpos	e of changi	na its i	reaistered
office or re	egistered agent, or both, in the State	e of Florid	tà. Such cha	ange was a	uthorized	by th	he corporati	ion's bo	oard of directors. I hereby a	ccept the a	ppointment	as reg	gistered
agent. I at	m familiar with, and accept the oblig	ations of.	Section 607	7.0505 Eio	vida Statu	tae							
-					niga Otala	ics.			•				
SIGNATURE							ekanahira reguire	ad when re	reinstating)	DAT	E		
SIGNATURE	Signature, typed or printed name of registered age	jent and title if	if applicable				signature require		reinstating) ADDITIONS/CHANGES TO			ECTO!	RS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS A	jent and title if	if applicable		: Registered /	Agent s	signature require						RS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered ago OFFICERS A	jent and title if	if applicable	(NOTE	Registered A	Agent s	signature require				S AND DIRE		
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M.	jent and title if	if applicable	(NOTE	13. 1.1 TIT	Agent s					S AND DIRE		
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY	jent and title if	if applicable	(NOTE	13. 1.1 TITU 1.2 NAM	Agent s LE VIE REET A	ADDRESS				S AND DIRE		
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL	jent and title if	if applicable	DELETE	13. 1.1 TITE 1.2 NAM 1.3 STF	Agent s LE ME REET A	ADDRESS				S AND DIRE	ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P	jent and title if	if applicable	(NOTE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITT 2.1 TITL	LE ME REET A	ADDRESS				S AND DIRE	ange	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J.	jent and title if	if applicable	DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM	Agent s ME REET A Y-ST-	ADDRESS ZIP				S AND DIRE	ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STF	Agent s LE ME REET A Y-ST-	ADDRESS ZIP				S AND DIRE	ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J.	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STF 2.4 CIT	Agent s LE ME REET A Y-ST- LE ME REET A	ADDRESS ZIP				S AND DIRE	ange ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE	13. 1.1 TIT 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITI 4.3 TITI 4.4 CIT	LE ME REET A Y-ST-LE REET A Y-ST-LE	ADDRESS ZIP				S AND DIRE	ange ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAA 1.3 STF 1.4 CITTL 2.2 NAA 2.3 STF 2.4 CITTL 3.1 TITL 3.2 NAA	LE ME REET A REET A REET A REET A REET A REET A	ADDRESS ZIP ADDRESS -ZIP				S AND DIRE	ange ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITL 2.2 NAI 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAI 3.3 STF	LE ME REET A REET A REET A REET A	ADDRESS ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TIT 1.2 NAM 1.3 STF 1.4 CIT 2.2 NAM 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAM 3.3 STF 3.4 CIT 3.4 CIT 3.4 CIT 3.4 CIT 3.5 CIT 3.6 CIT 3.7 TIT 3.7 NAM 3.7 TIT 3.7 NAM 3.8 CIT 3.8 CIT	LE ME REET A Y-ST-LE ME Y-ST-LE ME REET A REET A Y-ST-LE ME REET A Y-ST-LE	ADDRESS ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TIT. 1.2 NAI 1.3 STF 1.4 CIT 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIT. 3.2 NAI 3.3 STF 3.4. CIT 4.1 TITL	LE ME REET A	ADDRESS ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange	Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITT 2.1 TITL 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STF 3.4 CIT 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NA	LE ME REET A Y-ST-LE ME REET A Y-ST-LE ME REET A Y-ST-LE ME	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP				S AND DIRE	ange ange	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITT 2.1 TITL 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STF 3.4 CIT 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.3 NA	LE ME REET A Y-ST-LE ME REET A Y-ST-LE ME REET A Y-ST-LE ME	ADDRESS ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITT 2.1 TITL 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STF 3.4 CIT 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NAM 4.2 NAM 4.3 NAM 4.2 NA	Agent s LE ME REET A Y-ST- E ME REET A Y-ST- E ME REET A ME REET A ME REET A	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS				S AND DIRE	ange ange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE	13. 1.1 TITL 1.2 NAM 1.3 STF 1.4 CITT 2.1 TITL 2.2 NAM 2.3 STF 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STF 3.4 CIT 4.2 NAM 4.3 STF 4.4 CITT 5.1 TITL	LE WE REET A Y-ST-LE WE WE Y-ST-LE ME REET A Y-ST-LE ME REET A LE LE LE LE LE LE LE LE LE L	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS				S AND DIRE	ange ange	Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF 4.1 TITI 4.2 NAA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAA	LE ME REET A REET A ME REET A REET A REET A Y-ST- E ME REET A Y-ST- LE ME REET A ME REET A HE REET A	ADDRESS -ZIP -ADDRESS -ZIP -ZIP -ZIP -ADDRESS -ZIP				S AND DIRE	ange ange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF 4.1 TITI 4.2 NAA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAA	LE ME REET A REET A ME REET A REET A REET A Y-ST- E ME REET A Y-ST- LE ME REET A ME REET A HE REET A	ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS				S AND DIRE	ange ange	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF 4.1 TITI 4.2 NAA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAA	LE ME REET A A Y-ST-LE ME REET A A PY-ST-LE ME REET A A PY-ST-LE ME REET A A	ADDRESS ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAA 5.3 STF	LE ME REET A A REET A	ADDRESS ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange ange	Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AI VP HARROW, ANDREW M. 6504 SEABIRD WAY APOLLO BEACH FL P HARROW, SUSAN J. 6504 SEABIRD WAY	jent and title if	if applicable	DELETE DELETE DELETE	13. 1.1 TITI 1.2 NAA 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAA 4.3 STF 4.4 CIT 5.1 TITI 5.2 NAA 5.3 STF 5.4 CIT 5.4 CIT 5.5 TITI 5.5 NAA 5.5 STF 5.6 CIT	LE ME REET A A STANDER ME REET A A STANDER ME REET A ME	ADDRESS ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS				S AND DIRE	ange ange ange	Addition Addition Addition Addition

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 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 cath; 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP