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

PROFIT CORPORATION **ANNUAL REPORT**

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(5)

Mailing Address

DOCUMENT # THE GIFTED GOOSE, INC.

FILED Jun 04 1998 8:00am Secretary of State



1407 20TH ST VERO BEACH		1407 20TH STREET VERO BEACH FL 32960			
				DO NOT WRITE IN THI 3. Date Incorporated or Qualified	S SPACE
				03/19/1985	
2. Principal Pl	ace of Business	2a. Mailing Address	In Cal	4. FEI Number	Applied For
21 445	_ & I !!!AVE SM		Ive SW	59-2534242	Not Applicable
sine, Apt. 4, etc. 27 Suite A 27 Suite A				5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Vero Beach FL 28 Vero Beach			en FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip 329	68 25 Indian Rive	2 32968 3	oldian Ru	8. This corporation owes or has paid the of Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	it Registered Agent	- 641 11	10. Name and Address of New Registere	d Agent
NICHOLSON, LINDA L B1 Namo Icholson Linda L					
1407 201H ST 82 Street Addres				Address (P.O. Box Number is Not Acceptable)	
VERO BEACH FL 32960 445 2740 Ave. SW					
			B4 City	ero Beach F	L 85 Zip Code
11, Pursuani t	o the provisions of Sections 607.050	2 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. Law family with, and accept the objections of, Section 607.0505, Florida Statutes.					
SIGNATURE	Trule XY/	Cholson	Linda	L. Nicholson 4	1-25-98
	Signature Typical or pointest matricial (Poistered ari)	entaret i entrapolicia il (NOTE) D DIRECTORS	Flogistered Agent's gnature		ND DIDECTORS IN 12
12.	DS OFFICERS AIV	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	PAGANESSI, FRANCES		1.2 NAME		
STREET ADDRESS	346 21ST AVE		1.3 STREET ADDRESS		
CiTY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	TDP	☐ DELFTE	2.1 TITLE		Change
NAME	NICHOLSON, LINDA		2.2 NAME	- 11 of 1 Aug	-
STREET ADDRESS	1165 34 AVE SW		2.3 STREET ADDRESS	346 Slot Ave) ()
CITY-ST-ZIP	VERO BCH FL	DOLLET	2. 4 CITY-ST-ZIP	Vero Beach FL 329	
TITLE		DEFETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE -		Change Addition
NAME		— ** ***	4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP		•	4.4 CITY-ST-7IP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	artify that the information countried w	ath this filling stage and quality for	6.4 CITY-ST-ZIP	ed in Section 119.07(3)(i). Florida Statutes, Lfurther	certify that the information

I nereby certify that the information supplied with this filling docs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 this corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607.