

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **H53577** (3)
1. Corporation Name
GEMI, CORP.

Principal Place of Business P.O. BOX 1585 PONTE VEDRA BEACH FL 32004-1585 US	Mailing Address P.O. BOX 1585 PONTE VEDRA BEACH FL 32004-1585 US
--	--

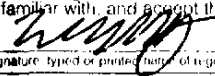


DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/22/1985	
4. FEI Number 22-2613401	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

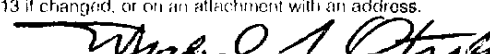
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30		3. Date Incorporated or Qualified 04/22/1985	
9. Name and Address of Current Registered Agent LOBRANO, STEVEN 76 S. LAURA ST, SUITE 2100 JACKSONVILLE FL 32202		10. Name and Address of New Registered Agent 81 Name Brant, Moore, Macdonald & Wells, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 50 North Laura Street, Suite 3100 83 84 City Jacksonville, FL 85 Zip Code 32202			

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  / **William P. Brant, President** **4-24-98**
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	OTROK, MICHAEL J.	1.2 NAME	
STREET ADDRESS	182 SEA HAMMOCK WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	PONTE VEDRA BEACH FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HURD, GEORGE A. JR.	2.2 NAME	
STREET ADDRESS	SANTEE MILL RD. R.D. 2	2.3 STREET ADDRESS	
CITY-ST-ZIP	BETHLEHEM PA	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	HUBBS, ROBERT J.	3.2 NAME	
STREET ADDRESS	SANTEE MILL RD. R.D. 2	3.3 STREET ADDRESS	
CITY-ST-ZIP	BETHLEHEM PA	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 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.

SIGNATURE  **41-108 609-655-0185**

CR2E034 (10/97)