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

Apr 14 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H86469 (4)GILDER & GILDER, INC. Principal Place of Business Mailing Address 1095 JUPITER PK DR. 1095 JUPITER PK OR. DO NOT WRITE IN THIS SPACE JUPITER FL 33458 JUPITER FL 33458 3. Date incorporated or Qualified 11/21/1985 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 5 AME A BOUG SAMĿ Not Applicable 59-2604146 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name GILDER, LARRY 124 S. HAMPTON DR. 82 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33458 83 Zip Code 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, and familiar with, and accept the enliquations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE (NOTE: Registered Agent signature required when reinstating) ERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1.1 TITLE Change TITLE NAME GILDER, LARRY 1.2 NAME STREET ADDRESS 124 S. HAMPTON DR. 1.3 STREET ADDRESS JUPITER FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE GILDER, MARILIE NAME 2.2 NAME 124 S HAMPTON DR. STREET ADDRESS 2.3 STREET ADDRESS JUPITER FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CATY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME

FILED

Change

Addition

6.4 CITY-ST-ZIP 14. 1 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 truestoee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or on an attachment with an address.

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

Parlie Suffer (MARING GILDER) 4-7-98 561-747-2659