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

PROFIT CORPORATION ANNUAL REPORT

1997

TITLE NAME

STREET ACCORDS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J34167

(3)

GIBBS REALTY & INVESTMENTS, INC.

Principal Piace of Business % CYNTHIA A. GIBBS 4000 POTOSI RD PENSACOLA FL 32504		Mading Address % CYNTHIA A. GIBBS 4000 POTOSI RD PENSACOLA FL 32504-8400							
	• • • • • • • • • • • • • • • • • • • •	1 212 12 22 2			'	3. Date Incorporated or Qualified 09/22/1986		ate of Last Re /22/1996	port
2. Principal P. 21	ace of Business	2a. Mailing Address 26				4. FEI Number 59-2734852			plied For t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc				5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State 23		Orty & State				Election Campaign Financing Trust Fund Contribution	<u></u>	\$5.00 Added to	•
Z(ş) 24	Country 25	7ip 29	30 Cou	intry			Yes	No	199.032,
	9. Name and Address of Cur	rent Registered Agent		241 11		10. Name and Address of New R	egister e d	Agent	
	BS, CYNTHIA A.			B1 Name)				
	O POTOSI RD.			82 Street	Addres	ss (P.O. Box Number is Not Accepta	ible)		
PEN	ISACOLA FL 32504			83			····		
				03					
				84 City			FL	85 Zip C	Code
office or n agent. Fal SIGNATURE	to the provisions or sections out. Gegsternd agent or both in the St in landlar with, and accept the ob-					ration submits this statement for the n's board of directors. I hereby account divident reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
tit.E	PD	DELETE	1.1.TI	TLE				Change	Addition
NAME	GIBBS, CYNTHIA A.		1.2 N						
STREET ADDRESS	4000 POTOSI RD		- 1	TREET ADDRESS	-				
CITY - \$1 - 76*	PENSACOLS FL	☐ DELETE	1.4 C 2 1 Ti	ITY-ST-ZIP	╁			Change	Addition
THUE NAME			2 1 H					L. Change	LJ Addition
STREET ADDRESS				TREET ADDRESS					
CHY-ST 7.0				CITY - ST - ZIP					
1111		☐ DELETE	31 T		1			☐ Change	Addition
NAME			32 N	AME	1				
STREET ADDRESS			338	treet address					
00Y-51-Z4/				HTY-ST-ZIP					
TTEF		L_1 DELETE	4.1 Ti					L Change	Addition
NAME				IAME					
STREET ADDRESS				TREET ADDRESS	[
OTY ST-ZIF TILE		DELETE	4.4 C 5.1 T	ITY - ST - ZIP			<u></u>	☐ Change	Addition
		C DECEM	5.1 V						٠١٥٥١١٥١١ ر_
NAME STREET ACTUREDS				anne Treet address					
CITY-57-ZIP				ineri addinego ITY+ST+ZIP					
1014		☐ DELETE	6.1 (+	***************************************		Change	Addition

6.2 NAME 6.3 STREET ADDRESS

64 CITY-ST-ZIP

14. If do hereby certify that the interpretation supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this of hold 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

SIGNATURE: MANUTER OF PRINCE OF PRINCE OF DIFFERENCE OF DI

904-478-9885

FILED

Jan 27 1997 8:00am

Secretary of State