

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

FILED
May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J54400 (3)
1. Corporation Name
GATORBACK, INC.



Principal Place of Business Mailing Address
% WILLIAM C. WEST % WILLIAM C. WEST
9780 16TH ST. N 9780 16TH ST. N
ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716-4210
US US

2. Principal Place of Business 2a. Mailing Address
21 766 Placido Way NE 26 766 Placido Way NE
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 St. Petersburg, Florida 28 St. Petersburg, Florida
24 33704 25 Pinellas 29 33704 30 Pinellas

3. Date Incorporated or Qualified 01/29/1987 3a. Date of Last Report 05/01/1996
4. FEI Number NOT APPLICABLE 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
WEST, WILLIAM C. 81 Name William C. West
9780 16TH ST. N. 82 Street Address (P.O. Box Number is Not Acceptable)
ST. PETERSBURG FL 33716 766 Placido Way NE
83
84 City St. Petersburg FL 85 Zip Code 33704

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 C. West, Pres. 7-27-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE STD 1.1 TITLE ☐ Change ☐ Addition
NAME WEST, WILLIAM C. 1.2 NAME
STREET ADDRESS 9780 16TH ST. N. 1.3 STREET ADDRESS
CITY-ST-ZIP ST. PETERSBURG FL 33716 1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

CR2E034 (9/96)