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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

J54400

(3)

GATORBACK, INC.

FILED
May 05 1998 8:00am
Secretary of State

Zip Code

Principal Place of Business	Maiting Address		4 VERIAIN BADA BAINI DADA BADA BAINI BANK BANK BANK BANK BANK BANK BADA BADA ANDA
766 PLACIDO WAY NE ST. PETERSBURG FL 33704 US	766 PLACIDA WAY ST. PETERSBURG US		DO NOT WRITE IN THIS SPACE
	•		Date Incorporated or Qualified 01/29/1987
2. Principal Place of Business	2a. Mailing Addres	s	4. FEI Number Applied For
21	26		NOT APPLICABLE Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, et	lc.	5. Certificate of Status Desired See Required Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country 25	Ζιρ 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes M No
g, Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WEST, WILLIAM C. 766 PLACIDO WAY NE ST. PETERSBURG FL 33704			reet Address (P.O. Box Number is Not Acceptable)

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 chango 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 Signature, typed or printed name of registered agent and like it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change STD. DELETE Addition TITLE 1.1 THE WEST, WILLIAM C. NAME 9780 16TH ST. N. STREET ADDRESS 13 STREET ADDRESS **ST.PETERSBURG FL 33716** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 21 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY-ST-ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP DELETÉ Addition **6.1 TITLE** NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 receive 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 attack media and address.

4-27-GK 57700