**FILED** 

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90058 038 \*\*\*158.75



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # J94681 1. Corporation Name

GINGERICH ENTERPRISES, INC.

Principal Plac		-		7	, 1051114 6114 6111 611				27277 47277			
5750 FRUITVILLE RD 1025 HONORE							,					
SARASOTA FL 34232 SARASOTA FL 34232 US US							DO NOT WRITE IN THIS SPACE					
00		50				3	Date Incorporated or 09/30/1987	Qualifed			.,	
2. Principal Place of Business 2a. Mailing Address							4. FEI Number			$\neg \neg$	Applied For	
21	Taco or Daswisso	26				ļ	65-0009466				Not Applica	able
Suite, Apt.	#. etc.	Suite, Apt. #, etc.								\$8.75 Additional		
22	.,	27				5	5. Certifcate of Status Desired			Fee Required		
City & Sta	tē	City & State				- 6	. Election Campaign Fir	ancing		\$5.0	0 May Be	
23		28					Trust Fund Contribution	n	l	Adde	d to Fees	
Zip	Country	Zip	Co	untry		8	. This corporation owes	the current y	ear Inta	angible		
24	25	29	30				Personal Property Tax			Yes	<b>X</b> INo	
	9. Name and Address of Curren	t Registered Agent		工		10	). Name and Address of	f New Regis	stered A	Agent		
_				81	Name	)						
GINGERICH					Street	t Address (	Address (P.O. Box Number is Not Acceptable)					
	5 HONORE AVE.			82	5.,000		Tables (F.O. Dox Hamber is Not Acceptable)					
SAF	rasota FL 34232			83		<del></del>					_	
				-	015					85 Z	p Code	
				84	City				FL	103 2	b code	
12.		D DIRECTORS	13			required when	ADDITIONS/CHANGES	TO OFFICE	RS AN	D DIREC		
TITLE	PT	☐ DELÉTE	1.1 TITLE 1.2 NAME 1.3 STREE							Cuang	je U Au	uluori
NAME	GINGERICH, LESTER											
STREET ADDRESS					ADDRESS	s						
CITY-ST-ZIP	SARASOTA FL		_	CITY-S	T-ZIP	<del></del>				Char	e Ad	dition
TITLE	\ <b>V</b>	☐ DELETE	2.1	TITLE						Chang	le 🗀 Mu	uiuoii
NAME	GINGERICH, JOSEPH		2.2	NAME								•
STREET ADDRESS			2.3 STREE		TADDRESS	s						
_CITY-ST-ZIP	SARASOTA FL			CITY-5	T-ZIP	<del> </del>		<del></del>		- Chan	ie ∏Adi	dition
TITLE	D	☐ DELETE		TITLE						☐ Chang	le [] Au	uluon
NAME	GINGERICH, RHODA		3.2	NAME								
STREET ADDRESS			3.3	STREET	r address	s						
CITY-ST-ZIP	SARASOTA FL			CITY-S	T-ZIP	<del> </del>				☐ Chang	ne 🗀 Ad-	dition
TITLE	S	☐ DELETE		TITLE							<sub>г</sub> Пи	210011
NAME	GINGERICH, JASON			NAME		.						
STREET ADDRESS					r address	5						
CITY-ST-ZIP	SARASOTA FL	Ci pereze	_	CITY-S	T-ZIP	<del> </del>	ceounit 1			Chang	ie □ Ad	dition
TITLE	0	GINGERICH, JOHN MARK		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		GIM	essigh, p	4X MI	geic	A CHAIR	ıv Linu	JIEUI
NAME						101	SINGERICH, JOHN MARK 1015 HONDRE AUE.					
STREET ADDRESS						SAR	ASOTA , F	L				
CITY-ST-ZIP	SARASOTA FL	C) OCI CTC		CITY-S'	1-219	+ 7.		<del>-</del>		[] Chanc	je □ Ad	dition
TITLE		☐ DELETE		NAME						_ >	,,	
NAME					TADDRESS	s						
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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP