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Apr 17 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 # K95398 (9)
1. Corporation Name
G.C. TRUAX, INC.



Principal Place of Business
1726 E 7TH AVENUE
TAMPA FL 33605
US

Mailing Address
1726 E 7TH AVENUE
TAMPA FL 33605-3806
US

3. Date Incorporated or Qualified 06/14/1989
3a. Date of Last Report 05/01/1996

2. Principal Place of Business
21 1718 E. 7th Ave
22 Suite/Apt #, etc. 201
23 City & State TAMPA, FL.
24 Zip 33605 25 Country USA

2a. Mailing Address
26 1718 E. 7th Ave
27 Suite/Apt #, etc. 201
28 City & State TAMPA, FL.
29 Zip 33605 30 Country USA

4. FEI Number 59-2952867
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
TRUAX, GREG
1726 E 7TH AVENUE
TAMPA FL 33605

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE 4-14-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PD
NAME TRUAX, GREG
STREET ADDRESS 1726 E 7TH AVENUE
CITY-ST-ZIP TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS 1718 E. 7th Ave, Suite 201
1.4 CITY-ST-ZIP TAMPA, FL, 33605

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.

SIGNATURE: GREG TRUAX. 4-14-97 813-248-1887
SIGNATURE (NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #

CR2E034 (9/96)