

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # L15949 (5)

1. Corporation Name

G.L.E. ASSOCIATES, INC.



Principal Place of Business

601 BAYSHORE BLVD
STE 600
TAMPA FL 33606
US

Mailing Address

601 BAYSHORE BLVD
STE 600
TAMPA FL 33606
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

30

3. Date Incorporated or Qualified

09/12/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2975164

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$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

XX

Yes

□ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENE, ROBERT B.
601 BAYSHORE BLVD
STE 600
TAMPA FL 33606

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

Signature, typed or printed name of registered agent and title if applicable.

(NOT: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

POT

□ DELETE

NAME

GREENE, ROBERT B.

STREET ADDRESS

601 BAYSHORE BLVD, STE 600

CITY - ST - ZIP

TAMPA FL

TITLE

D

□ DELETE

NAME

GREENE, CAROLYN T.

STREET ADDRESS

600 N WESTSHORE BLVD 500

CITY - ST - ZIP

TAMPA FL

TITLE

D

□ DELETE

NAME

GREENE, WILLIAM H.

STREET ADDRESS

600 N WESTSHORE BLVD 500

CITY - ST - ZIP

TAMPA FL

TITLE

S

□ DELETE

NAME

BAKACH, CONNIE

STREET ADDRESS

601 BAYSHORE BLVD, STE 600

CITY - ST - ZIP

TAMPA FL

TITLE

VP

□ DELETE

NAME

COOK, STEPHEN

STREET ADDRESS

601 BAYSHORE BLVD, STE 600

CITY - ST - ZIP

TAMPA FL

TITLE

□ DELETE

NAME

□ DELETE

STREET ADDRESS

□ DELETE

CITY - ST - ZIP

□ DELETE

1.1 TITLE

Secretary

□ Change

XX Addition

1.2 NAME

Greene, Robert B.

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

□ Change

□ Addition

2.2 NAME

2.3 STREET ADDRESS

601 Bayshore Blvd. Ste 600

2.4 CITY - ST - ZIP

Tampa, FL 33606

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

Treasurer

Johnson, David E.

601 Bayshore Blvd. Ste 600 Tampa, FL 33606

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 as changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-96

(813)258-8350

Date

Daytime Phone #

CR2E034 (12/95)