

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

FILED

May 05 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 # L17591 (3)
1. Corporation Name
GIF, INC.



Principal Place of Business
1408 NORTH WESTSHORE BLVD.
SUITE 908
TAMPA FL 33607

Mailing Address
1408 NORTH WESTSHORE BLVD.
SUITE 908
TAMPA FL 33607-4584

3. Date Incorporated or Qualified
09/21/1989

3a. Date of Last Report
02/20/1996

4. FEI Number
59-2969231

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

STORY, STEPHEN F
1408 NORTH WESTSHORE BLVD, #908
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name
Peter J. Kelly

82 Street Address (P.O. Box Number is Not Acceptable)
501 East Kennedy Boulevard - Suite 1400

83

84 City
Tampa

85 Zip Code
FL 33602

11. Pursuant to the provisions of Sections 607.0502 and 607.1808, 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, word or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	STORY, STEPHEN F	1408 N. WESTSHORE BLVD., SUITE 908	TAMPA FL	<input checked="" type="checkbox"/>
S	TRAMONTANO, LILLIAN	1408 N WESTSHORE #908	TAMPA FL	<input type="checkbox"/>
TAS	CASSIDY, EUGENE F	1408 NORTH WESTSHORE BLVD, SUITE 908	TAMPA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
1.1	President/Director			<input type="checkbox"/>
1.2	Hugh F. Culverhouse, Jr.	One Biscayne Tower - Suite 3599	Miami, FL 33131	<input type="checkbox"/>
2.1				<input type="checkbox"/>
2.2				<input type="checkbox"/>
2.3				<input type="checkbox"/>
2.4				<input type="checkbox"/>
3.1				<input type="checkbox"/>
3.2				<input type="checkbox"/>
3.3				<input type="checkbox"/>
3.4				<input type="checkbox"/>
4.1	Director			<input type="checkbox"/>
4.2	Andrew N. Cappello	100 North Tampa Street - Suite 3000	Tampa, FL 33602	<input checked="" type="checkbox"/>
4.3				<input type="checkbox"/>
4.4				<input type="checkbox"/>
5.1	Director			<input type="checkbox"/>
5.2	Thomas K. Purcell	225 Water Street - Suite 1235	Jacksonville, FL 32202	<input checked="" type="checkbox"/>
5.3				<input type="checkbox"/>
5.4				<input type="checkbox"/>
6.1				<input type="checkbox"/>
6.2				<input type="checkbox"/>
6.3				<input type="checkbox"/>
6.4				<input type="checkbox"/>

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:

Hugh F. Culverhouse Jr.

CR2E034 (9/96)