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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

L70012

(4)

GENE COOK REAL ESTATE INVESTMENTS, INC.

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Principal Place of Business Mailing Address					i saeiran dii dadii kanii 4000 ili	FO THE BUILDING DAY		ili umili oldil iggi	
4432 FLORI PAGE FL 32	DATOWN ROAD 571	4432 FLORIDATOWI PACE FL 32571	N ROAD						
					3. Date Incorporated or Qualified 05/03/1990	3a. Date	of Last F 7/21/19		
2. Principal Place of Business		F	2a. Maing Address		4. FEI Number			Applied For	
Suite, Apt. #, etc		·	Suite, Apt. #, etc.				Not Applicable	2	
22		27	1		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State  23  Zip Country		Cily & State			Flection Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
24 ZID	Country Zip		Country		8. This corporation has liability for i		cunder s	199.032,	
	9. Name and Address of Curr	ent Registered Agent	[30]		Florida Statutes X Yes				
				1 Name	10. Name and Address of New R	egistered A	gent		_
COOK, WILLIAM E.					ress (P.O. Box Number is Not Acceptab				
	ORIDATOWN ROAD		83		ress ( . C. box Number is Not Acceptab				
PACE F	L 323/1			3					
			8	4 City		FL	85 Zi	ρ Code	$\dashv$
familiar with	h, and accept the obligations of, Se Supative treatment of particle and specific appropriate appropriate superior particles.	ction 607.0505, Fiorida Statuti	25	rporation's bloa ertsgratus regine	ration submits this statement for the pur rd of directors. Thereby accept the appx	intrnent as r	egistered	egistered omce Lagent Lam	
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		DIRECTO	ORS IN 12	⊣ફે
THTLE	P	DELFTE	1. 1 TITE	F			Change	Addition	(12/95)
NAME		COOK, WILLIAM E.							7
STREET ADDRESS	4432 FLORIDATOWN RD PACE FL		13 STRE	et address					
CITY-ST-ZIP TITLE	VPT		14 C/TY						CR2E034
NAME	MINCHEW, BOBBY	[ ] Deceil	2 1 TITLI			. 🗆	Change	Addition	ျပ
STREET ADDRESS	2547 RISEN DRIVE		2.2 NAM5						
CITY-ST-ZIP	CANT FL			ET ADORESS					
TITLE		☐ DELETE	2.4 CiTy 3.1 Till (				Change		1
NAME			3.2 NAME			L	Change	☐ Addition	
STREET ADDRESS				ET ADDRESS					İ
CITY ST-ZIP			3.4 CITY -	)					
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NAME			4.2 NAME	ŀ		_	,	hand	
STREET ADDRESS			4 3 STREE	LADORESS					
CITY-ST-ZIP			4 4 CITY	S1 - ZiP					
TITLE		☐ DELETE	5 1 TITLE				Change	Addition	1
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-S1-ZIP		ET or or	5 4 City -						
TIPLE		DELETE	6 1 71114				Change	☐ Addition	1
NAME STREET ARTHROOG			6.2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-SI-ZIP	and the state of t		64 CI* Y -	\$1-7IP					

SIGNATURE:

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, if changed, or or an attachment with an address.

GNATURE:

SIGNATURE

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Later 1990 A 1990

3-15-96 (904) 623-6003