Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

XNo

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

30

DOCUMENT # L71457

25

24

1. Corporation Nam	ie					
GW ENTERP	rises, inc.					
Principal Place of Business MARVIN A UROUHART, JR. PANAMA CITY FL 32401		Mailing Address				
		314 MAGNOLIA AVE.				
		PANAMA CITY FL	32401			
US		US				
]						
ļ						
2. Principal Place of Business		2a. Mailing Addre	ess			
21	•	26				
Suite, Apt. #, etc		Suite, Apt. #,	etc.			
22		27	•			
City & State		City & State				
23		28				
Zip	Country	Zip	Country			

29

9. Name and Address of Current Registered Agent

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90092 015 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

05/07/1990 4. FEI Number

59-3015125

MARVIN A. URGUHART JR. 314 MAGNOTIA AVENUE			1				
			82	Street Address (P.O. Box Number is Not Acceptable)			
PAN	AMA CITY FL 32401		83				
•			84	City	FL	85 Z	ip Code
office or t	to the provisions of Sections 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Such m familiar with, and accept the obligations of, Section	i change was auth	orized by	the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoin	changing ntment as	its registered registered
	m tamiliar with, and accept the obligations of, Section	1 607 .0000, Florida	Statutes	•			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	. (NOTE: Re	gistered Ager	nt signature re	equired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE	VPD	DELETE	1.1 TITLE			☐ Chang	ge
NAME	PATRONIS, JIMMY T JR.		1.2 NAME	ĺ			
STREET ADDRESS	314 MAGNOLIA AVENUE		1.3 STREE	T ADDRESS		•	
CITY-ST-ZIP	PANAMA CITY FL		1,4 CITY-S	T-ZIP		_	
TITLE	PD	☐ DELETE	2.1 TITLE			Chang	ge
NAME	URQUHART, MARVIN A JR		2.2 NAME		•		
STREET ADDRESS	314 MAGNOLIA AVE		2.3 STREE	TADDRESS			
CITY-ST-ZIP	PANAMA CITY FL		2.4 CITY-S	T-ZIP		3	
TITLE	SD	☐ DELETE	3.1 TITLE			Chang	ge 🔲 Addition
NAME	PATRONIS, JIMMY T		3.2 NAME				
STREET ADDRESS	314 MAGNOLIA AVENUE		3.3 STREE	TADDRESS			
CITY-ST-ZIP	PANAMA CITY FL		3.4. C/TY-5	it-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Chang	ge
NAME	•		4.2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		DELETE	5.1 TITLE		•	Chang	ge
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Chang	ge
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADDRESS			
CITY-ST-ZIP		s not qualify for th	6.4 CITY-S	T-ZIP			

indicated on this altitual report of supplemental attitual report is due and accorded and this report as in live the composition of 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.