

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L71470

(3)

1. Corporation Name

GULFSTREAM EXTERMINATING, INC.



Principal Place of Business

1095 JUPITER PK DR
STE 13
JUPITER FL 33458
US

Mailing Address

1095 JUPITER PARK DR
STE 13
JUPITER FL 33458
US

3. Date Incorporated or Qualified

05/07/1990

3a. Date of Last Report

03/23/1995

2. Principal Place of Business

21 Sub, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Sub, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number

65-0200483

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

LINDA T. GORE
1095 JUPITER PK DR
STE 13
JUPITER 33458

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

Signature of Registered Agent (if not the same as the corporation's name)

Signature of Registered Agent (if not the same as the corporation's name)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	GORE, H. GEARL	
STREET ADDRESS	610 XANADU PL	
CITY, ST, ZIP	JUPITER FL	
TITLE	D	DELETE
NAME	SCHUPP, RALPH E.	
STREET ADDRESS	706 XANADU PL	
CITY, ST, ZIP	JUPITER FL	
TITLE	PT	DELETE
NAME	GORE, LINDA	
STREET ADDRESS	610 XANADU PL	
CITY, ST, ZIP	JUPITER FL	
TITLE	DVPS	DELETE
NAME	SCHUPP, SUSAN F.	
STREET ADDRESS	706 XANADU PL	
CITY, ST, ZIP	JUPITER FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☒ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

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 or 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: *Linda T. Gore* LINDA T. GORE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/96

(407)

744-2142

DATE

Telephone Number

CR2E034 (12/95)