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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

918A B. PARSONS AVE

BRANDON FL 33511



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M68703

(1)

Mailing Address

P.O. BOX 1045

BRANDON FL 33509-1045

BOB G. GILL & ASSOCIATES, INC.

FILED
Apr 21 1997 8:00am
Secretary of State



US		U\$									
						 Date Incorporated or Qualified 02/10/1988 	d 3a. Date of Last Report 05/01/1996				
	Place of Business	2a. Mailing Address				4. FEI Number		A	pplied For		
	-BN-Parsons	26				59-2869061			lot Applicable		
	Suite, Apt. #, etc. Suite, Apt. #, etc.			o o	÷	5. Certificate of Status Desired			Additional		
661 ,		27				To deliver of olding position		Fee F	Required		
City & Stat		City & State			6. Election Campaign Financing	The state of the s					
20 Bran	ndun, FL Country	7:0	Zip Country			Trust Fund Contribution			to Fees		
	551D 25 US 29 30			uniry		B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No					
24 330	9. Name and Address of Current Registered Agent					Florida Statutes					
ENI	HLE, STELLA		Name								
779 W LIMODEN DOAD											
733 WEST LUMSDEN ROAD					82 Street Address (P.O. Box Number is Not Acceptable)						
					83						
Div	31001112 00011		-								
				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											
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 itself applicable (NOTE Registered Agent a gent are required when reinstating) DATE											
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE					
TITLE	P	☐ DETELE	1.1 11	ITLE			l	Change	☐ Addition		
NAME	BOB G. GILL		1.2 N	AME							
STREET ADDRESS	1423 NEW BRITAIN DRIVE		1.3 5	1.3 STREET ADDRESS							
CITY-ST-ZIP				(TY - ST	I - ZIP						
TITLE		☐ DELETE	2.1 11			vice President	L	Change	Addition		
NAME			2.2 N		1.	Leonard A. Cavaller 1458 Doncaster Drive					
STREET ADDRESS			2.3 STREE								
CITY-ST-ZIP TITLE			CITY-S	1-7IP	downgstown, Ohio 44511		7	100			
NAME			3.1 71			Treasurer Diane fii II 423 NewBritainDriv	L	Change	Addition		
STREET ADDRESS			3.2 N			plane him	p		Ī		
			and the second		ADDRESS 1	425 New Strains					
CITY-ST-ZIP TITLE		DELETE	4.1 TI	HY-S	1-ZIP E	Brandon, Fl. 33511	·	7 (5	Addition		
NAME		LJ officit	4.1 H				L	Change	L_] Addition		
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP											
TITLE		DELETE	51 TI	11Y-S1	1-21P		r	Change	Addition		
NAME		hard Second	52 N/				L	Grange	Addition		
STREET ADDRESS					address						
CITY-ST-ZIP.	lander (Artista)			17Y-S1							
TITLE 13	444	DELETE	61 TI		- 41r		Г	Change	Addition		
NAME		The second secon	6.2 N/					- Criorigo			
STREET ADDRESS	•				ADDRESS						
ATTILLED MODIFIEDS			0.3 \$1	intti	MUUNESS						

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 in this stee 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 ap alternment with an address.