


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

FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M70398 (6) 1. Corporation Name GOODING'S OF MAITLAND, INC.					
Principal Place of Business 483 MONTGOMERY PLACE ALTAMONTE SPRINGS FL 32714			Mailing Address 2349 APOPKA BLVD APOPKA FL 32703		
2. Principal Place of Business 21 2349 Apopka Blvd. Suite, Apt. #, etc. 22 City & State 23 Apopka, FL Zip 24 32703		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 25 USA		3. Date Incorporated or Qualified 02/23/1988 4. FEI Number 59-2877082 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent GOFF, J. LESLIE 2349 APOPKA BLVD APOPKA FL 32703			10. Name and Address of New Registered Agent 81 Name Brewer, Francis J. 82 Street Address (P.O. Box Number is Not Acceptable) 2349 Apopka Blvd. 83 84 City Apopka FL 85 Zip Code 32703		
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 Francis J. Brewer, CFO 1/08/98 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE CD <input checked="" type="checkbox"/> DELETE NAME GOODING, JAMES E. STREET ADDRESS 400 SWEETWATER CLUB BLV CITY-ST-ZIP LONGWOOD FL			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE VD <input type="checkbox"/> DELETE NAME GOODING, MARY LOU STREET ADDRESS 400 SWEETWATER CLUB BLV CITY-ST-ZIP LONGWOOD FL			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE CEO <input type="checkbox"/> DELETE NAME GOODING, JONATHAN STREET ADDRESS 3036 ALATKA CT CITY-ST-ZIP LONGWOOD FL			3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME Gooding, Jonathan 3.3 STREET ADDRESS 3036 Alataka Ct. 3.4 CITY-ST-ZIP Longwood, FL		
TITLE VSD <input checked="" type="checkbox"/> DELETE NAME GOFF, J. LESLIE STREET ADDRESS 1770 CARLTON ST. CITY-ST-ZIP LONGWOOD FL			4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME Brewer, Francis J. 4.3 STREET ADDRESS 600 Errol Parkway 4.4 CITY-ST-ZIP Apopka, FL 32712		
TITLE AS <input type="checkbox"/> DELETE NAME LOY, JULIE GOODING STREET ADDRESS 3093 TIMPANA POINT CITY-ST-ZIP LONGWOOD FL			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE P <input checked="" type="checkbox"/> DELETE NAME CIANCARULO, MICHAEL STREET ADDRESS 2349 APOPKA BLVD CITY-ST-ZIP APOPKA FL			6.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6.2 NAME Doerk, Russell 6.3 STREET ADDRESS 2349 Apopka Blvd. 6.4 CITY-ST-ZIP Apopka, FL 32703		

14. I 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- Francis J. Brewer 1/08/98 407 880-5203

CH2E034 (10/97)