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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

1996 DIVISION OF CORPORATIONS  DOCUMENT # P00357 1. Corporation Name GROSS FAMILY, INC.							
Principal Place of Business Mailing Address  254 SAN RON DRIVE WEBSTER NY 14580 WEBSTER NY 14580							
					3. Date incorporated or Qualified 12/21/1983	3a. Date of Last I 01/25/19	
Principal Plac	ce of Business	2a. Mailing Address			4. FE! Number		Applied For
Coults Apr 8	oto	[26]	·		16-1186615		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 7	5 Additional Required
ity & Stale		City & State			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
'nρ	Country	Zip	Countr	у	8. This corporation has liability for		
	25	29	30			СИ	
	9. Name and Address of Currer	nt Registered Agent	8'	1 Nanie	10. Name and Address of New F	legistered Agent	
GOLDMA	IN, STEVEN E.		82		ress (P.O. Box Number is Not Acceptat	nle)	
	L CONCOURS					······································	
	ICKELL AVE.		8:	3			
MIAMI FI	_ 33131		84	6 City		FL 85 2	?ip Code
anature ;	y core types or protect came of registered agen OFFICERS AN PD	t and little of agriculties (f) ID DIRECTORS DELETE	101t Registered Ag		xd when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECT	
4	GROSS, ANTONIO, JR.		1.2 NAME	i			
- LADDR: 3S	254 SAN RON DRIVE WEBSTER NY			F1 ADDRESS			
\$1-7P	VD WEDSTER INT	[] DELETE	2.1 TITLE			Change	Addition
	GROSS, ANTONIO		2.2 NAME			G	
LADDRESS	254 SAN RON DRIVE		2 3 STREI	ET ADDRESS			
\$1-79	WEBSTER NY STD	DELETE	2 4 C·TY-			Change	Addition
	GROSS, ROSEMARIE H.	Detter	3 2 NAME				☐ ¥00/li01
ELADOHESS	254 SAN RON DRIVE			ET ADDRESS			
-SI-7F			3.4 CITY	- ST - ZIP			
		DELETE	4 1 TITLE			Change	Addition
E E1 ACIDRESS			4.2 NAME	ET ADDRESS			
\$1-719			44 CITY				
		☐ DELFTE	5 1 THE	·	<del></del>	☐ Change	: 🔲 Addition
			5.2 NAME				
LLADDRESS				ET ADDRESS			
ST-21F	☐ DELETE		5 4 CITY - ST - ZIP 6 1 TITLE			Change	Addition
ı			6.2 NAME			El cuango	
FLAD (FESS)				ET ADORESS			
-S1-ZiF			6 4 CITY	- ST - ZIP			
- certify that - oath; that I	the information indicated on this ann	iual report or supplemental an oration or the receiver or trust	nnual report is t tee empowered	rue and accur	for the exemption stated in Section 119 ate and that my signature shall have the iis report as required by Chapter 607, F	i same legal effect as	if made under

SIGNATURE

MGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

ANTONIO SIGNING OFFICER OR DIRECTOR

GROSS

1/17/96

7/L - 165-1240