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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # 1. Corporation Name GROSS FAMILY, INC.

P00357

Principal Place of Business

(4	4)
•	•

Mailing Address

FILED								
Feb	12	1997	8:00am					
Se	cre	tary o	of State					



254 SAN RON WEBSTER NY		254 SAN RON DRIVE WEBSTER NY 14580-13	60								
							3. Date Incorporated or Qualified 12/21/1983	3a. Da	ate of Last F 1/24/1990	Report	
	Principal Place of Business 2a. Mailing Address				4. FEI Number 16-1186615			optied For			
21 College Appl 4	1 aka	Cuito Apt # ata					10.1100010			ot Applicable	
Suite, Apt. #	r, etc.	Suite, Apt #, etc.					5. Certificate of Status Desired			Additional equired	
City & State 23	City & State City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Z(p 24	Country 25	Zıp	Zip Country				8. This corporation has tiability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	9, Name and Address of Cur	rent Registered Agent		I		1	IO. Name and Address of New Re	gistered	Agent		
GO	ldman, steven e.			81	Name	€					
BRICKELL CONCOURS 1401 BRICKELL AVE.			82	Stree	t Address	(P.O. Box Number is Not Acceptate	ole)				
	MI FL 33131			83				· · · · · · ·			
				84	City			FL	85 Zip	Code	
11. Pursuant to	o the provisions of Sections 607.0	0502 and 607.1508. Florida Statu	ites, the a	Ll	-name	d corpora	ation submits this statement for the			ts registered	
office or re	egistered agent, or both, in the St	ate of Florida. Such change was	authorize	ed by	the co	rporation	ation submits this statement for the part of directors. I hereby accepts	pt the app	ointment as	registered	
	migniikii wan, and accept the or	T, COCQ. YOU HONDOO, IV. SHOIIBBIIK	ioriua ote	as us to a).						
SIGNATURE	Signature, typical or printed name of registered	agent and title if applicable (NO	TE: Register	ed Age	nt signatu	re required w	/hen reinstating)	DATE			
12.	OFFICERS.	AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO	RS IN 12	
TITLE	PO	DELETE	1.1	TITLE					Change	Addition	
NAME	GROSS, ANTONIO, JR.		1.21	NAME							
STREET ADDRESS	254 SAN RON DRIVE		135	STAEET	ADDRESS	i				}	
CITY - ST - ZIP	WEBSTER NY		140	CITY-S	T-ZIP					_	
TITLE	VD	☐ DELETE	211	ITLE					Change	Addition	
NAME	GROSS, ANTONIO		2.2 !	NAME							
STREET ADDRESS	254 SAN RON DRIVE		2.3	STREET	ADDRESS	i					
CITY-S1-ZIP	WEBSTER NY		2.4	CITY - S	ST-ZIP	<u> </u>					
THE	STD	☐ DELETE	3.1	TITLE					Change	Addition	
NAME	GROSS, ROSEMARIE H.		3.21	NAME				e September			
STREET ADDRESS	254 SAN RON DRIVE		3.3	STREET	ADDRESS	5	·				
CITY-ST-ZIP	WEBSTER NY		3.4.	CITY-S	ST-ZIP				Y-1 .		
TITLE		☐ DELETE	4,11	ITLE		\			Change	L. Addition	
NAME			4.2	NAME							
STREET ADDRESS			4.3	STREET	ADDRESS	5					
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	T perese		CITY-S	T • ZIP				110	170.00	
TITLE		L' DELEIE		TITLE		1			L Change	L Addition	
NAME:				NAME							
STREET ADDRESS					ADDRESS	·					
CITY-ST-ZIP		nei fyr		CITY-S	1 - ZIP	 			Change	Addition	
TITLE		DELETE.		FITLE					☐ Change	Montion	
NAME			1	NAME							
STREET ADDRESS					ADDRESS	5					
CiTY-ST-7IP			6.4	CITY-S	T-ZIP		0 - 0 - 440 07/0/05 50 - 15 - 0 - 4				

Too 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.