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FILED

Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P11384 (5)

1. Corporation Name

GYA, INC.



Principal Place of Business

Mailing Address

C/O TERRY DEES KOLENICH
4 NAVY LANE
SPANISH FT. AL 36527
USC/O TERRY DEES KOLENICH
4 NAVY LANE
SPANISH FT AL 36527-3067
US3. Date Incorporated or Qualified
09/10/19863a. Date of Last Report
04/29/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

4. FEI Number

59-2129669

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VAILLANT, FRANCOIS D.
1421 LAMHURST RD.
PENSACOLA FL 32507

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE

P
NAME NACE, ROBERT I.
STREET ADDRESS 2 OAK LANE
CITY-ST-ZIP MONTROSE AL☐ DELETE

13. TITLE

V
NAME FRANK ALLEN
STREET ADDRESS 855 E SCENIC DR
CITY-ST-ZIP PASS CHRISTIAN MS☐ DELETE

14. TITLE

ST
NAME TERRY DEES KOLENICH
STREET ADDRESS 4 NAVY LANE
CITY-ST-ZIP SPANISH FORT AL☐ DELETE

15. TITLE

D
NAME VAILLANT, FRANCOIS D.
STREET ADDRESS K121 LEMHURST RD
CITY-ST-ZIP PENSACOLA FL☐ DELETE

16. TITLE

D
NAME MARSHALL, BROWN
STREET ADDRESS 307 MONAHAN DRIVE
CITY-ST-ZIP FT. WALTON BEACH FL☐ DELETE

17. TITLE

O
NAME MORROW, JOHN
STREET ADDRESS P. O. BOX 1446/465 HARRISON AVENUE
CITY-ST-ZIP PANAMA CITY FL☐ DELETE

1.1 TITLE

P
12 NAME FRANK ALLEN
13 STREET ADDRESS 855 E SCENIC DR
14 CITY-ST-ZIP PASS CHRISTIAN, MS 39571☒ Change ☐ Addition

2.1 TITLE

V
2.2 NAME FRANCOIS D. VAILLANT
2.3 STREET ADDRESS 1421 LEMHURST RD
2.4 CITY-ST-ZIP PENSACOLA, FL 32507☒ Change ☐ Addition

3.1 TITLE

ST
3.2 NAME TERRY DEES KOLENICH
3.3 STREET ADDRESS 4 NAVY LANE
3.4 CITY-ST-ZIP SPANISH FT, AL 36527☒ Change ☐ Addition

4.1 TITLE

D
4.2 NAME MARSHALL BROWN
4.3 STREET ADDRESS 307 MONAHAN DRIVE
4.4 CITY-ST-ZIP FT. WALTON BEACH, FL☒ Change ☐ Addition

5.1 TITLE

D
5.2 NAME JOHN MORROW
5.3 STREET ADDRESS 465 HARRISON AVE
5.4 CITY-ST-ZIP PANAMA CITY, FL 32402☒ Change ☐ Addition

6.1 TITLE

D
6.2 NAME LARRY TAGGART
6.3 STREET ADDRESS 5809 MEMPHIS ST
6.4 CITY-ST-ZIP NEW ORLEANS, LA 70124☒ Change ☐ Addition

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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Terry Dees Kolenich Terry Dees Kolenich 11/13/97 334-434-3675

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0076067

CR2E037 (9/96)