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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24041

(6)

G.E.A., INC., A DELAWARE CORPORATION

ION //

Apr 14 1998 8:00am
Secretary of State

EII ED

Principal Place of Business	Mailing Address		
1950 SE PT. ST. LUCIE BLVD. #203 PT. ST. LUCIE FL 34952	1950 SE PT. ST. LUCIE BLVD. #203 PT. ST. LUCIE FL 34952	DO NOT WRITE IN THIS SPACE	
		3. Date Incorporated or Qualified 04/24/1989	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied Fo

58-1852324 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 29 g. Name and Address of Current Registered Agent

MCCARTHY, TERENCE P. 2081 EAST OCEAN BLVD. STUART FL 34996

	10. Hame and Address of Hew Liebustered Agent
81	GEORGE E. MEXANDER, TR
62	Name GEOPGE F. ALEXALDER, TR Street Address (P.O. Box Number is Not Acceptable) 1950 S.E. PORT ST, WILLE BLYD.
83	SUITE 203
84	City.

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 beard 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 CHOIGE E. ALEXANDER TR. Signature. Nyrold or printed name of registering and title it applicable. TIRE (INDIE Registered and signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PST DELETE	1.1 TITLE	Change Addition			
NAME	ALEXANDER, GEORGE E, JR.	1.2 NAME				
STREET ADDRESS	1950 SE PT. ST. LUCIE BLVD., #203	1.3 STREET ADDRESS				
CITY-ST-ZIP	PT. ST. LUCIE FL 34952	1.4 CITY-ST-ZIP				
TITLE	D DELETE	2.1 TITLE	Change Addition			
NAME	alexander, george e, jr.	2.2 NAME				
STREET ADDRESS	1950 SE PT. ST. LUCIE BLVD., #203	2 3 STREET ADDRESS				
CITY-ST-ZIP	PT. ST. LUCIE FL 34952	2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE	3.1 TITLE	Change Addition			
NAME		3.2 NAME	·]			
STREET ADDRESS		3.3 STREET ADDRESS	1			
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CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 as 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 conforation 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 granged, or on an attachment spirit and others.

SIGNATURE: E

14/20