NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P25592 (7)

1. Corporation Name
GECOS, INC.

Principal Place of Business	Mailing Address
1936 LEE RD. WINTER PARK FL 32789	1936 LEE RD. WINTER PARK FL 32789

3. Date Incorporated or Qualified: 08/14/1989
3a. Date of Last Report: ~~02/16/1995~~ 3/96

2. Principle Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 74-1919546 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 607.0502 and 607.1506, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	NEOUZE, JEAN FRANCOIS		1.2 NAME		
STREET ADDRESS	11 BLVD JEAN-MERMOZ		1.3 STREET ADDRESS		
CITY-ST-ZIP	NEUILLY SUR SEINE FR		1.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE	VS	☒ Change ☐ Addition
NAME	LINK, RAYMOND A.		2.2 NAME	O'DEA, J. FREDERICK JR.	
STREET ADDRESS	1936 LEE RD		2.3 STREET ADDRESS	1936 LEE RD	
CITY-ST-ZIP	WINTER PARK FL		2.4 CITY-ST-ZIP	WINTER PARK, FL	
TITLE	CD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ROUDE, JEAN-CLAUDE		3.2 NAME		
STREET ADDRESS	11 BLVD. JEAN-MERMOZ		3.3 STREET ADDRESS		
CITY-ST-ZIP	NEUILLY SUR SEINE FR		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	TRICOT, HERVE		4.2 NAME		
STREET ADDRESS	TOUR FIAT CEDEX 16		4.3 STREET ADDRESS		
CITY-ST-ZIP	PARIS LA DEFENSE FR		4.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ALLARD, JEAN-MARC		5.2 NAME		
STREET ADDRESS	1936 LEE ROAD		5.3 STREET ADDRESS		CS 5/16/97
CITY-ST-ZIP	WINTER PARK FL		5.4 CITY-ST-ZIP		
TITLE	AS	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	TANNER, JANICE C.		6.2 NAME	800002171548	
STREET ADDRESS	1936 LEE RD		6.3 STREET ADDRESS	-05/08/97--01099--021	
CITY-ST-ZIP	WINTER PARK FL		6.4 CITY-ST-ZIP	***165.00	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: J. Frederick O'Dea Jr. J. Frederick O'Dea Jr. 4/30/97 (407) 623-3410
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

J. Frederick O'Dea Jr.