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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000001718 (4) DOCUMENT # 1. Corporation Name

GEEMICK PROPERTIES, INC.

Principal Place	of Business	Mailing Address	<u> </u>				
1117 4TH ST I ST PETERSBU		1117 4TH ST N ST PETERSBURG FL 33701					
					3. Date Incorporated or Qualified 01/04/1993	3a. Date of Last F 05/01/19	
2. Principal Pla	ce of Business	2a. Mailing Address 26			4. FEI Number 59-3161891		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	5. Certificate of Status Desired Security Securi		
City & State		City & State		Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip Country 25		Zip [29]	29 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes Yoo		
	9, Name and Address of Curren	it Registered Agent	B1	Name	10. Name and Address of New R	egistered Agent	
VAN CILA	AEYS, GLEN M		0.				
1117 4TH	I ST N		L		ress (P.O. Box Number is Not Acceptab	le)	
SI PETE	RSBURG FL 33701	,	83	İ			
			84	City		FL 85 Z	ip Code
or registere	o the provisions of Sections 607.0502 ad agent, or both, in the Stale of Flori n, and accept the obligations of, Sect	da. Such change was authori	ized by the corp	named corpor poration's boa	ration submits this statement for the pur rrd of directors. I hereby accept the appo	pose of changing its pintment as registere	registered office d agent. I am
PICMATURE	•						
Olovanione.	Signature, typod or printed name of registered again		IOTE Registered Age	nt signarure require		DATE	
12.	PD OFFICERS AN		13.	r	ADDITIONS/CHANGES TO OFFI		
TITLE	VAN SIMAEYS, GLEN M	DELETE	1. 1 TITLE			Change	Add-tion
NAME OTOTES ADDRESS	24862 US 19 N #2204		1.2 NAME	LADODEGO			
STREET ADDRESS	CLEARWATER FL 34623			I ADDRESS			
CITY-ST-ZIP TITLE	ST	DELETE	1.4 City - 5 2. 1 Title	51-2IF		Change	Addition
NAME	VAN SIMAEYS, ANITA O		2 2 NAME				
STREET ADDRESS	24862 US 19 N #2204			f address			
CITY - ST - ZIP	CLEARWATER FL 34623		2 4 CHY-				
TITLE		DELETE	3 1 TITLE	<u> </u>		Change	Addition
NAME			3.2 NAME		•••		
STREET ADDRESS			33 STREE	T ADDRESS			
CITY-ST-ZIP			3 4 CITY-1	SI-Z-P			
TITLE		DELFIE	4. 1 1iTLE			☐ Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY - ST - ZIP			4 4 CITY -	S1 - ZIP			
TITLE		☐ DELETE	5 1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS				I AODRESS			
CITY+ST-ZIP TITLE		DELETE	5.4 CHTY-1 6. 1 THTLE	S1-ZIP		[] Change	☐ Addition
NAME		[beech.	6.2 NAME				
STREET ADDRESS			i i	T ADDRESS			
Ofty-ST-ZIP			6.3 STREE				
14. I do hereb certify that oath; that I	the information indicated on this anni	ual report or supplemental an bration or the receiver or trust	rnished and doe nual report is tr tee empowered	es not qualify ue and accura	for the exemption stated in Section 119, ate and that my signature shall have the his report as required by Chapter 607, Flo	same legal effect as	if made under
opposid III	(1)	STATE OF THE REVIEW AND ACT	-11/	, 1	un ulular		

SIGNATURE:

Daytime Phone #