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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300001718 (4)

**GEEMICK PROPERTIES, INC.** 

1117 4TH ST N ST PETERSBUR		1117 4TH ST N ST PETERSBURG FL 33701	-1725	3. Date Incorporated or Qualified	3a. Date of Last Report
				01/04/1993	05/01/1996
<b>2.</b> Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
11		26		59-3161891	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	>	City & State		6. Election Campaign Financing	\$5.00 May Be
3		26		Trust Fund Contribution	Added to Fees
Ζ(r)	Country 25	Zip 29	Country 30	8. This corporation has liability for in	ntangible tax under s. 199.032,
71	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Reg	
VAN	SIMAEYS, GLEN M		81 Name		
	4TH ST N		22 2		
ST PETERSBURG FL 33701			82 Street Address (P.O. Box Number is Not Acceptable)		
V1 (	ETETIODOTTO TE GOTOT		83		· · · · · · · · · · · · · · · · · · ·
			84 City		FL 85 Zip Code
office or r agent. La SIGNATURE	egistered agent, or both, in the Stat rn familiar with, and accept the oblig Signature types or present range of regulated ag	gations of, Section 607.0505, Flo	uthorized by the corpor rida Statutes.  Rogistered Agent signature req	ation's board of directors. I hereby acceptions when reinstating)	of the appointment as registered
12.	OFFICERS AT	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TIFLE	PD	DELET <del>E</del>	1.1 TITLE		Change Addition
NAME	VAN SIMAEYS, GLEN M		1.2 NAME		
STREET ADDRESS	24862 US 19 N #2204		1.3 STREET ADDRESS		
ÇITY-ST-ZIP	CLEARWATER FL 34623		1.4 CITY - ST - ZIP		
THLE	ST	DELETE	2 1 TITLE		Change Additio
NAME	VAN SIMAEYS, ANITA O		2.2 NAME		
STREET ADDRESS	24862 US 19 N #2204	•	2.3 STREET ADDRESS		
City-ST-ZIP	CLEARWATER FL 34823		2. 4 CITY-ST-ZIP		
1011		DELETE	3.1 TITLE		Change Addition
NAME		-	3.2 NAME		<del></del>
STREET ADORESS			3.3 STREET ADDRESS		
CITY - ST - ZiF			3.4. CITY-ST-ZIP		
THUE		DELETE	4.1 Title		Change Addition

14. If 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 607, Florida Statutes; and that my name appears in Block 12 or Block/13 if changed, or on an attachment with an address.

6.4 CITY - ST - ZIP

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5 4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

SIGNATURE

NAME

TIFLE

NAME

1000

NAME

STREET ADDRESS CITY: ST-ZIC

STREET ADDRESS

STREET ACCORESS

CITY - ST - 712

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

april 26, 1997 Dayline Proce

Change

Change

Addition

Addition

**FILED** 

May 01 1997 8:00am

Secretary of State