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

P93000013480 (7) DOCUMENT #

GMS PROFESSIONAL GROUP, INC. Principal Place of Business Mailing Address 245 18TH AVE. P.O. BOX 1197 VERO BEACH FL 32962 VERO BEACH FL 32961 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/15/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0386137 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zψ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GETCHELL, GARY S **245 18TH AVENUE** Street Address (P.O. Box Number is Not Acceptable) 82 **VERO BEACH FL 32962** 83 Zip Code 84 City F 11. Pursuant to the provisions of Soctions 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 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. (NOTE: Registered Agent signature required when reinstaling) Signature, typed or protect nome of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change GETCHELL, GARY, S NAME 1.2 NAME 245 18TH AVE STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL 32962 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 21 TITLE MCCLEARY, MILDRED 22 NAME STREET ADDRESS 1111 ADMIRAL'S WALK 2.3 STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.110118 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. City-St-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 appeal 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 of 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.

SIGNATURE:

561-569-6700 wt 412

FILED

May 05 1998 8:00am

Secretary of State