

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

25 MAY -1 AM 9:04

DOCUMENT # P93000022099 (4)

1. Corporation Name

GORHAM EXPENSE ANALYSIS & REDUCTION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1044 CASTELLO DR
SUITE 211
NAPLES FL 33940

Mailng Address

1044 CASTELLO DR
SUITE 211
NAPLES FL 33940

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

03/22/1993

3a. Date of Last Report

03/07/1994

4. FET Number

65-0467391

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

BECKWITH, C.G. J
1044 CASTELLO DR
SUITE 211
NAPLES FL 33940

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 601.01(2), and 601.01(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent as both in the State of Florida. The foregoing 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 Sections 607.01(2) Florida Statutes.

SIGNATURE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME

P
BECKWITH, C.G. J
1044 CASTELLO DR #211
NAPLES FL

1. NAME

Beckwith, Jr., C. G.

☒ Change ☐ Addition

STREET ADDRESS

2. NAME

☐ Change ☐ Addition

CITY & STATE

3. NAME

☐ Change ☐ Addition

NAME

4. NAME

☐ Change ☐ Addition

STREET ADDRESS

5. NAME

☐ Change ☐ Addition

CITY & STATE

6. NAME

☐ Change ☐ Addition

NAME

7. NAME

☐ Change ☐ Addition

STREET ADDRESS

8. NAME

☐ Change ☐ Addition

CITY & STATE

9. NAME

☐ Change ☐ Addition

NAME

10. NAME

☐ Change ☐ Addition

STREET ADDRESS

11. NAME

☐ Change ☐ Addition

CITY & STATE

12. NAME

☐ Change ☐ Addition

NAME

13. NAME

☐ Change ☐ Addition

STREET ADDRESS

14. NAME

☐ Change ☐ Addition

CITY & STATE

15. NAME

☐ Change ☐ Addition

NAME

16. NAME

☐ Change ☐ Addition

STREET ADDRESS

17. NAME

☐ Change ☐ Addition

CITY & STATE

18. NAME

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19. NAME

☐ Change ☐ Addition

STREET ADDRESS

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CITY & STATE

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☐ Change ☐ Addition

CITY & STATE

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☐ Change ☐ Addition

STREET ADDRESS

26. NAME

☐ Change ☐ Addition

CITY & STATE

27. NAME

☐ Change ☐ Addition

NAME

28. NAME

☐ Change ☐ Addition

STREET ADDRESS

29. NAME

☐ Change ☐ Addition

CITY & STATE

30. NAME

☐ Change ☐ Addition

14. I, the Secretary, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 601.01(2)(b), Florida Statutes. I further certify that the information included 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 this corporation, the name of which is printed on the report as required by Chapter 607, Florida Statutes, and that my name appears in Article 1 of the corporation's charter or articles of incorporation.

Gorham Expense Analysis & Reduction

SIGNATURE:

President

4-15-95

813 434 0909

by C. G. Beckwith, Jr.

(SIGNATURE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)