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

CORPORATION ANNUAL REPORT

1998



ELORIDA DEPAREMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000030589 (4)

GREAT G.C. OPERATORS, INC.

Principal Place of Business Mailing Address 203 LOOKOUT PLACE 203 LOOKOUT PLACE SUITE A SHITE R DO NOT WRITE IN THIS SPACE MAITLAND FL 32751 MAITLAND FL 32751 3. Date Incorporated or Qualified 04/23/1993 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 59-3184805 Not Applicable 26 Suite, Apt #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Z(t)This corporation owes or has paid the current year Intangible Yes □ Ño 30 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 81 DANNEN, DOUGLAS Name 203 LOOKOUT PLACE Street Address (P.O. Box Number is Not Acceptable) SUITE B 83 **MAITLAND FL 32751** 84 City Zip Code 11. Pursuant to the provisions of Sections 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. SIGNATURE (NOTE_Figurered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELLIE Change Addition DANNEN, DOUGLAS NAME 1.2 NAME 203 LOOKOUT PLACE, SUITE B STREET ADDRESS 1.3 STREET ADDRESS MATTLAND FL 32751 1.4 CITY - ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAM6 STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELFTE Addition Channe TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE Change 51 TIME TITLE NAME 5.2 NAME

14. Thereby certify that the information supplied with this bling 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 supplicmental 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 deceiver 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 that an address

5.3 STREET ADDRESS

6 3 STREET ADDRESS 6.4 CITY - ST - ZIP

5.4 CITY - ST- ZIP

61 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

1/29/48

FILED

Feb 11 1998 8:00am

Secretary of State

Change

Addition

CR2E034 (10/97