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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000032889 (6) DOCUMENT #

GAMBLER & WOOD, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		4 SECTIONS SECTION SEC	0190 Testi 19001 Total Igilo Igilo Igil
1913 SOUTH DIXIE HIGHWAY 1913 SOUTH DIXIE HIGH				
WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3		FL 33401	DO NOT WRITE IN	THIS SDACE
			3. Date Incorporated or Qualified	THIS SPACE
			05/04/1993	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0421566	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		-	CO 75 A 186
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zıp	Country	8. This corporation owes or has paid to	
24 25 g, Name and Address of Current	29	30	Personal Property Tax due June 30.	Yes No
	negistered Agent	81 Name	10. Name and Address of New Regist	erea Agent
WOOD, WILLIAM			Grant Gambler	
1913 \$O UTH DIXIE HIGHWAY WEST PALM BEACH FL 33401		B2 Street A	Address (P.O. Box Number is Not Acceptable)	
MEST FALM DEACH PL 33901		B3 1 9	113 2 1/x16 Hw	4
				•
		84 City	01 2. 4	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607 1508 Florida Stat	tutes the above pamed	correction submits this statement for the sure	FL 33 441
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligat	f Florida. Such change wa	s authorized by the corp	poration's board of directors. I hereby accept the	e appointment as registered
1 /2 < / . / (ions of, Section 607.0505,	Florida Statutes.	1/20/	a c-
SIGNATURE Signature, hyped conduct name of regulared agent	and trie if applicable (N	IOTE Registered Agent signature	required when reinstating)	Y 8
12. OFFICERS AND	-:	13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME WOOD, WILLIAM	•	1.2 NAME		
STREET ADDRESS 217 AVILA ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP WEST PALM BEACH FL		1.4 CITY - ST - ZIP		
TITLE D	☐ DELETE	2.1 TITLE		Change Addition
NAME GAMBLER, S.G.		2.2 NAME		
STREET ADDRESS 1913 SOUTH DIXIE HIGHWAY		2.3 STREET ADDRESS		
CITY-ST-ZIP WEST PALM BEACH FL	- December	2.4 CITY-ST-ZIP	4	:
TITLE	☐ DELETE	3.1 TITLE	5	Change Addition
NAME OTREST ADDRESS		3.2 NAME	Kenneth Blackbur	n
STREET ADDRESS		3.3 STREET ADDRESS		tighway
CITY-ST-ZIP	☐ DFLETE	3 4. CITY - ST - ZIP	Was T Palm Beach	132 9 9 4 Q d
NAME		1	D -	Change Addition
STREET ADDRESS		4. 2 NAME	Alvin Gleason	_
STREET AUDRESS CITY-ST-ZIP		4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	West Palm Beach	Highway
TITLE		4.4 CHY-SI-ZIP		2/ 33 VO I
•	DELETE	■ 51 TITLE	West rain beach	/ TChange L** Addition L
NAME	DELETE	1	west vain beach	Change Addition
NAME STREET ADDRESS	☐ DELETE	5.2 NAME	west vain beath	Change Li Addition
STREET ADDRESS	☐ DÉLETE	5.2 NAME 5.3 STREET ADDRESS	west talk beath	✓ * LTChange L3 Addition
	☐ DELETE	5.2 NAME	west talk beath	Change Addition
STREET ADDRESS City-St-Zip		5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - S1 - ZIP 6.1 TITLE	west talk beath	·
STREET ADDRESS CITY-ST-ZIP TITLE		5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	West vain Beath	·

14. I 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.