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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

2. Principal Place of Business

SIGNATURE:

P93000042937 (1)

2a. Mailing Address

26

GENERAL GENERAL, INC.

Principal Place of Business Mailing Address 6548 TANGLEWOOD BAY DRIVE 6548 TANGLEWOOD BAY DRIVE # 1822 # 1822 ORLANDO FL 32821 ORLANDO FL 32821



3a. Date of Last Report

407 345 355 7

05/01/1995

Applied For

3. Date Incorporated or Qualified

06/15/1993

21	26					59-3191803	Not Appli	icable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Addition	nal	
22		27				ļ	Fee Required	<u> </u>	
Oty & Sta	iie	City & State				6. Election Campaign Financing	<b>\$5.00</b> May B		
Zip	Country	<b>28</b>	Cour	otn:		Trost rans contribution	Added to Fees		
24	25	29	30	ппу		8. This corporation has liability for intanging Florida Statutes Yes XIN		4.	
<u></u> l	9. Name and Address of Curre	1.7.7.1	1001			10. Name and Address of New Registe			
				81	Name				
BURRIS, GARY 6548 TANGLEWOOD BAY DRIVE					Charak Aslala	Street Address (P.O. Box Number is Not Acceptable)			
					82 Street Address (P.O. Box Number is Not Acceptable)				
# 182			Ì	83					
	NDO FL 32821		}	84	04.				
				04	City	1	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above	ve-n	arned corpora	tion submits this statement for the purpose of	of changing its registered	office	
or registe	ered agent, or both, in the State of Flo vith, and accept the obligations of, Sec	nda. Such change was authorize	d by the c	orpo	oration's board	d of directors. I hereby accept the appointme	nt as régistered agent. La	am	
SIGNATURE		the contract of the contract o							
SIGNATORI.	Stynia one, typed or printed name of registered age	nt and title I applicable (NOT	E: Registered	Agent	l signature required s	when reinstating) DV	ATE		
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	2	
THUE	P	DELETE	1.170	TLE			Change Add	lition	
NAME	BURRIS, GARY		1.2 NA	ME					
STREET ADDRESS	6548 TANGLEWOOD BAY	DRIVE, #1822	1.3 \$7	REET	ADDRESS				
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STREET ADDRESS			2351	REET A	ADDRESS				
CITY - ST - ZIP			2.4 CIT	Y-ST	r-zip				
TITLE				3 1 TITLE			Change Add	lition	
NAME			3 2 NA	ME					
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NAME			4.2 NA		ĺ				
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NAME CENTRAL ADDRESSO			5.2 NAI						
STREET ADDRESS					ADORESS				
CITY ST ZIP TITLE		[7] DELETE	5 4 CIT		- ZIP	- Poly			
NAM		☐ DELETE	6. 1 TITLE				Change 🔲 Addi	HION	
			6.2 NAI						
STREET ADDRESS					ADDRESS				
City St Zin	by certify that the information supplied	with this filian is voluntarily funda	64 CIT	Y-ST	-ZIP	the exemption stated in Section 119.07(3)(k	V Fig. 14. Ohio in 18.		
						the exemption stated in Section 119.07(3)(k e and that my signature shall have the same if report as required by Chapter 607, Florida S			

SENTED NAME OF SIGNING OFFICER OR DIRECTOR