

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 2: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000051610 (2)

1. Corporation Name

GREAT WESTERN INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
**13408 SE 100 AVE
BELLEVUE FL 33420** **P O BOX 578
BELLEVUE FL 33421**

3. Date Incorporated or Qualified 07/21/1993	3a. Date of Last Report 07/29/1994
4. FEI Number 59-3196407	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	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent KNOUSE, STEVEN T 13408 SE 100 AVE BELLEVUE FL 33420	10. Name and Address of New Registered Agent
	81. Name
	82. Street Address (P O Box Number is Not Acceptable)
	83.
	84. City
	85. 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	12. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	13. STREET ADDRESS	
		14. CITY, ST, ZIP	
TITLE	NAME	21. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	22. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	23. STREET ADDRESS	
		24. CITY, ST, ZIP	
TITLE	NAME	31. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	32. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	33. STREET ADDRESS	
		34. CITY, ST, ZIP	
TITLE	NAME	41. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	42. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	43. STREET ADDRESS	
		44. CITY, ST, ZIP	
TITLE	NAME	51. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	52. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	53. STREET ADDRESS	
		54. CITY, ST, ZIP	
TITLE	NAME	61. TITLE	☐ Change ☐ Addition
STREET ADDRESS	STREET ADDRESS	62. NAME	
CITY, ST, ZIP	CITY, ST, ZIP	63. STREET ADDRESS	
		64. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139.02(3)(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 the corporation or the receiver or trustee empowered to make 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: STEVEN T. KNOUSE
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

8-15-95 (907) 288-4476
TALLAHASSEE, FLORIDA