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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000069086 (5)

GEL PROPERTIES, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address			. SERVINE THE COURSE SHARE BEING BROKE BOTTO	MIR BELFE MIN	O LAUFU BALBU IDI	JA 9611 (89)
1425 OAK HIG ORANGE CITY		1425 OAK HIGH CT ORANGE CITY FL 32763	1425 OAK HIGH CT ORANGE CITY FL 32763-3523						
						3. Date incorporated or Qualified 09/30/1993	1	ate of Last R	leport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			pplied For
21		26				59-3212552			ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		•	Additional equired
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip 29	30	ntry		This corporation has liability for Florida Statutes	r intengible Ves		: 199.032,
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New F	egistered	Agent	
ШШ	Y, GEORGE L			81	Name				
1425 OAK HIGH CT				82	Street Addre	ess (P.O. Box Number is Not Accepte	hle)		
ORANGE CITY FL 32763				83	- Groot / tags	- Control of the coupling of t			
				84	City		FL	85 Zip	Code
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was	s authorized	yd b	the corporati	oration submits this statement for the ion's board of directors. I hereby acc	purpose d	# of changing it pointment as	ts registered registered
SIGNATURE									
	Signatice, typestor printed name of regulation a	 		i Age	nt signature require	ed when reinstating)	DATE		
12.	Y ****** 10****** * 1.11	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	PSD	☐ DELETE	1.1 T()	TLE			•	Change	☐ Addition
NAME	LILLY, GOERGE L		1.2 NA	ME					
STREET ADDRESS	1425 OAK HIGH CT		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	ORANGE CITY FL	- Con FTG	1.4 CI		T-ZIP		,		F
TITLE	VSD	∐ DELETE	2.1 Tt1					L Change	☐ Addition
NAME	LILLY, EUNIS L		2.2 NA			,	134		
STREET ADDRESS	1425 OAK HIGH CT				ADDRESS		•		
CITY - ST - ZIP	ORANGE CITY FL	DELETE	2.40		ST-ZIP	,		1100	
TITLE		ן סנינונ	3.1 Til					L Change	☐ Addition
NAME STREET ADDRESS			3.2 NA		ADDOLCC				
					ADDRESS				
CITY - ST - ZIP TITLE		DELETE	3.4 CI 4.1 Til		or-Zir			Change	Addition
NAME		ting becel	4. 2 N					- orange	raumon
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.4 C)						
TITLE		DELETE	5.1 Til		1 411	······································		Change	Addition
NAME			5.2 NA			•			
STREET ADDRESS					ADDRESS				
CITY ST-ZIP			5.4 CI						
TITLE		☐ DELETE	6.1 TO		, 411			Change	Addition
NAME		_	6.2 NA						
STREET ADDRESS					ADDRESS				
CITY CT 710			0.0 31		7.70				

14. I do 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

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FILED

Jan 24 1997 8:00am

Secretary of State