SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P93000071936	(7)
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GREAT LAKES MARKETING, INC.

FILED Jul 15 1996 8:00 am Secretary of State

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21	
2. Principal Place of Business	,
Suite, Apt #, etc 27 City & State City & State City & State 28 Country Zip Country B. This corporation has triability for intangible tax under s Florida Statutes Yes No Name and Address of New Registered Agent SKALSKI, JOSEPH C 13770 58TH STREET NORTH SUITE 303 CLEARWATER FL 3462 81 Name 82 Street Address (PO. Box Number is Not Acceptable) Zip Zip 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 office or registered agent, or polit, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as reagent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SKALSKI, SKALSKI, JOSEPH C 13770 58TH STREET NORTH 82 Street Address (PO. Box Number is Not Acceptable) Zip Zip Zip Zip Zip Zip Zip Zi	pplied For
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28 Trust Fund Contribution Added Zip Country Zip Country 8. This corporation has liability for intangible tax under s Plorida Statutes Yes No 9. Name and Address of Current Registered Agent SKALSKI, JOSEPH C 13770 58TH STREET NORTH SUITE 303 CLEARWATER FL 3462 81 Name 82 Street Address (PO. Box Number is Not Acceptable) 93.00 10. Name and Address of New Registered Agent 81 Name 124 City CLAM WATER 1370 FL 85 Zipi 147 City CLAM WATER 147 City CLAM WATER 158 Zipi 169 Country 17 Street Address (PO. Box Number is Not Acceptable) 17 Street Address (PO. Box Number is Not Acceptable) 18 City CLAM WATER 19 Street Address (PO. Box Number is Not Acceptable) 29 Street Address (PO. Box Number is Not Acceptable) 29 Street Address (PO. Box Number is Not Acceptable) 20 Street Address (PO. Box Number is Not Acceptable) 20 Street Address (PO. Box Number is Not Acceptable) 21 Street Address (PO. Box Number is Not Acceptable) 21 Street Address of New Registered Agent 21 Street Address of New Registered Agent 21 Street Address (PO. Box Number is Not Acceptable) 22 Street Address (PO. Box Number is Not Acceptable) 23 Street Address (PO. Box Number is Not Acceptable) 24 City CLAM WATER 25 Street Address of New Registered Agent 26 Street Address of New Registered Agent 27 Street Address of New Registered Agent 28 Street Address of New Registered Agent 29 Street Address of New Registered Agent 29 Street Address of New Registered Agent 20 Street Address of New Registered Agent 21 Street Addr	Additional lequired
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12
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CITY-ST-ZIP 64 CITY-ST-ZIP 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 119 07(3)(k). Florida St	

further certify that the information subjilled with this iming is voluntarily 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if or linged, or on an attachment with an address.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN SANSINE 7/6/96 813-251-8717