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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000082380 (5)

**GNBC CORPORATION** 

## FILED May 16 1997 8:00am Secretary of State



Principal Pla						יו ופונו <b>ופוניו ק</b> גופו ופופ	P1)) 8 8 1 1 (FB)
Principal Place of Business Mailing Address  14201 CAROL MANOR DRIVE 14201 CAROL MANOR DRIV			P		1 100,000, 110 100,000 1011 0011 0011		
14201 CAROL LARGO FL 34		14201 CAROL MANOR DRIVE LARGO FL 33774-2040					
					3. Date Incorporated or Qualified 11/22/1993	3a. Date of Las 05/01/1996	
	Place of Business	2a. Mailing Address			4. FEI Number	L	Applied For
21		26		<b>59-3214391</b> Not Applic		Not Applicable	
Suite, Ap	et # etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	5 Additional
22		27				Fee	Required
City & St	ate	City & State			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
23 Zip	Country	Zip	Cour	ntry	This corporation has liability for in		
24	25	29	30	,	'	Yes No	9) B. 199.032,
:	9. Name and Address of Curren		1		10. Name and Address of New Rec	istered Agent	
ST/	AACK, JAMES A ESQ.			81 Name	ORBIT W. COOK		
600	CLEVELAND STREET		};		ress (P.O. Box Number is Not Acceptable	e)	1
	ITE 760		L	1420	I CAROL MAIN		<i>/</i>
CLI	EARWATER FL 34815		]	83	•		
			}	84 City		85 Z	Zin Code
			į	" CA	ergo	و FL	9994
11. Pursuar	nt to the provisions of Sections 607 050,	2 and 607.1508, Florida State	utes, the ab	ove-named corpora	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing the special transfer of	g its registered
agent. I	am familiar with and accept the obliga	ations of Section 607,0505, I	Florida Statu	10 50 port	6/	Al -	
SIGNATURE	Newsless	1002	200	mil		4-4	17
				Agent al nature requi	ired when remetating)	DATE	
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4. 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 annuals in Block 12 or Block 13 if chapted or on an attachment with an address.

SIGNATURE: SEAL WILL COME OF SIGNING OFFICER OR DE

8/3-595-005 Daytime Phone #