

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

FILED

May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000015548 (8)

1. Corporation Name
G. K. SPROWLS CORP.



Principal Place of Business

2800 PONCE DE LEON DR
NAPLES FL 33942

Mailing Address

2800 PONCE DE LEON DR
NAPLES FL 34105-2782

3. Date Incorporated or Qualified

03/01/1994

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 2800 PONCE DE LEON DR

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

65-0468294

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

City & State

23 NAPLES, FL

City & State

28 Zip Country

24 34105

29 30

9. Name and Address of Current Registered Agent

SPROWLS, GREGORY K
2800 PONCE DE LEON DR
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name SPROWLS, GREGORY K.
82 Street Address (P.O. Box Number is Not Acceptable) 2800 PONCE DE LEON DR.
83
84 City NAPLES FL 85 Zip Code 34105

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SPROWLS, GREGORY K
STREET ADDRESS 2800 PONCE DE LEON DR
CITY-ST-ZIP NAPLES FL 33942

TITLE S
NAME SPROWLS, AMY L
STREET ADDRESS 2800 PONCE DE LEON DR
CITY-ST-ZIP NAPLES FL 33942

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ZIP CODE ONLY - 34105

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ZIP CODE ONLY - 34105

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER: GREGORY K. SPROWLS, PRESIDENT.

4/26/97

(941) 643-2169

0413033

CR2E034 (9/96)