FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED

DOCUMENT # P94000029238 (0)

1. Corporation Name

GPC DRIVING, INC.

Principal Place of Business: 5649 CARDER ROAD, ORLANDO FL 32810

Mailing Address: 5649 CARDER ROAD, ORLANDO FL 32810

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/11/1994

3a. Date of Last Report:

2. Principal Place of Business
21 5125 ADANSON ST.
22 Suite, Apt. # etc. #400
23 City & State ORLANDO, FL
24 Zip 32804 25 Country

2a. Mailing Address
26 5125 ADANSON ST.
27 Suite, Apt. # etc. #400
28 City & State ORLANDO, FL
29 Zip 32804 30 Country

4. FEI Number 59-3234676 [ ] 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

9. Name and Address of Current Registered Agent

WEATHERFORD, WILLIAM P JR.
1031 WEST MORSE BLVD.
STE. 200
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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

TITLE	D
NAME	LOVELACE, G W
STREET ADDRESS	5649 CARDER ROAD
CITY, ST. ZIP	ORLANDO FL 32810
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	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST. ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[✓] Change [ ] Addition
1.2 NAME	
1.3 STREET ADDRESS	5125 ADANSON ST.
1.4 CITY, ST. ZIP	ORLANDO, FL 32804
2.1 TITLE	[ ] Change [ ] Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST. ZIP	
3.1 TITLE	[ ] Change [ ] Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST. ZIP	
4.1 TITLE	[ ] Change [ ] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST. ZIP	
5.1 TITLE	[ ] Change [ ] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST. ZIP	
6.1 TITLE	[ ] Change [ ] Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(ii), Florida Statutes. 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 to Banger, or in an attachment with an address.

SIGNATURE: Winston Lovelace

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 (407)740-5001

0060343 CP