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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

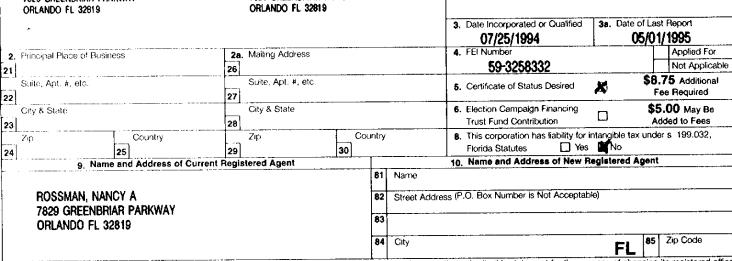
P94000055453 (2)

GWS, INC.

-			
	Principal Place of Business	Mailing	Add

7829 GREENBRIAR PARKWAY ORLANDO FL 32819

7829 GREENBRIAR PARKWAY



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.

S'GNATURE.	guidare, typed or printed name of registered agent and title if ap	plicable (NOT	E. Registered Agent signature required	
12.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
'IILE	VSD	☐ DELETE	1. 1 TITLE	Change Addition
VAME .	ROSSMAN, NANCY A		1.2 NAME	
TREET ADDRESS	7829 GREENBRIAR PARKWAY		1.3 STREET ADDRESS	
DIFY-S'-ZIP	ORLANDO FL 32819		14 CITY - ST - ZIP	the spirit
NTLF	PD	DELÉTE	2 1 TITLE	Change Addition
44ME	ROSSMAN, NORMAN A		2.2 NAME	
STREET ADDRESS	7829 GREENBRIAR PARKWAY		2.3 STREET ADDRESS	
CITY-ST ZIP	ORLANDO FL 32819		2 4 CITY - ST - ZIP	
LILE	TD	DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME	ROSSMAN, RUTH J		3 2 NAME	
STREET ADDRESS	7829 GREENBRIAR PARKWAY		3.3 STREET ADDRESS	
CITY ST- ZiP	ORLANDO FL 32819		3.4 CITY-ST-ZIP	
TITLE		DELETE	4 1 TITLE	☐ Change ☐ Addilio
IMAV			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY ST ZIP			4.4 CITY - ST - ZIP	
1:TCE		DECETE	5 1 TITLE	Change Additi
NAME			52 NAME	
STREET ACTORESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY - ST - ZIP	
TITLE		□ DELETE	6 1 TITLE	☐ Change ☐ Additi
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CiTY+ST+ZiP			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)(k), 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

SIGNATURE:

CR2E034 (12/95)