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PROFIT CORPORATION ANNUAL REPORT

1997



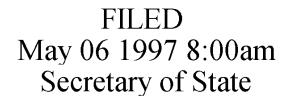
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500000234 (1)

GRAND CENTRAL MANUFACTURING, INC.





Principal Place 2062 BAYSHOF DUNEDIN FL 34	€ BLVD.	Mailing Address 2062 BAYSHORE BLVD. DUNEOIN EL 34698-2503				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 	
		·			 Date Incorporated or Qualified 12/30/1994 	3a. Date of Last R 05/01/1996	eport
2. Principal Pl	lace of Business	2a. Mailing Address	<u></u>		4. FEI Number		oplied For
	178 ALT. HWY 19 SOUTH 26 "SAME"				59-3283503	 	ot Applicable
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
22 27							equired
City & State City & State City & State City & State					Election Campaign Financing Trust Fund Contribution		May Be to Fees
Ζιρ	ρ Country Zip			try	8. This corporation has liability for intangible tax under s. 199.032,		
24 346	4683 25 USA 29 30		30		Florida Statutes		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent	
HOC	OVER, ROGER A			Name			
2062 BAYSHORE BLVD				32 Street Ad	ddress (P.O. Box Number is Not Accepta	ole)	
DUN	IEDIN FL 34698			128	ALT. HWY 19 S	OUTH	
			[0	33			,
}			-	34 City		95 7in	Code
			'	$\gamma \cap p_i$	ALM HARBOR	FL ° 3	12 x 3/1/
11. Pursuant	to the provisions of Sections 607,050	2 and 607 1508, Florida Statu	ites, the ab	ove-named c	orporation submits this statement for the	ourpose of changing i	s registered
office or n	registered agent, or both, in the State an familiar with, and accept the obliga	of Florida. Such change was ations of Section 607 0505. F	authorized Iorida Statu	by the corpo	ration's board of directors. I hereby acce	pt the appointment as	registered
	an ignifical with, and accept the oblige	3(10) 00 00 000 100 100 00 100 00 110	iorea ciala				1
SIGNATURE	Signature, typed or printed name of registered age	on and title if applicable (NO	TE: Registered	Agent signature re	quired when reinstating)	DATE	
12.	OFFICERS AN	D DIRECTORS	13.	······································	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	RS IN 12
TIFLE	VP	☐ DELETE	1.1 TITE			Change	☐ Addition
NAME	HOOVER, ROGER		1.2 NAA	AE			Addition
STREET ADORESS	2062 BAYSHORE BLVD.		1.3 \$TR	EET ADDRESS	178 ALT. HWY 19	SOUTH	. li
CITY-ST-ZiP	DUNEDIN FL		1.4 D/T1	r-ST-ZIP	PARM HARBOR!	7 34183	
TITLE	P	DELETE	2.1 TITL	£		Change Change	Addition
NAME	HOOVER, GREG		2.2 NAM	AE Ì		South	1
STREET ADDRESS	2062 BAYSHORE BLVD.		2.3 STA	EET ADDRESS	178 ALT. HWI 17	SUUIA	
CITY-S1-ZIP	DUNEDIN FL			Y-ST-7IP	PALM HARBOR	FL 346	83
DILE		DELETE	3 1 7171	E	178 ALT. HWY 19: PALM HARBOR, 1 178 ALT. HWY 19 PALM HARBOR,	Change	Addition
NAME			32 NA)	i			1
STREET ADORESS			- 1	EET ADDRESS			1
CHY-ST-ZIP				Y-ST-ZIP			
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NAME			4. 2 NA	1)
STREET ADDRESS	}		8	EFT ADDRESS			
CITY-S1-ZIF				Y-ST-ZIP			
TITLE		DELETE	5.1 TITE			Change	Addition
NAME			5.2 NA)				
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CITY-ST-ZIP	}		1	Y-ST-ZIP			1
TITLE		☐ DELETE	61 TIT			☐ Change	Addition
NAME	\	tand Date 16	6 2 NAI	- 1		- C80	
1	[
STREET ADDRESS				EET ADDRESS			
CrTY+ST-2IP		durish this files does not ave		Y-ST-ZIP	sted in Section 119 07(3)(i) Florida Statut	on I further cortify the	the

at 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 problemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that purply of the corposetion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Block 13 if changed, or one an attachment with an address. I do hereby certify that the in information indicated an thic Lam an officer or dire appears in Block 12 to

SIGNATURE: