

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000002435 (2)

1. Corporation Name
G.T. UNITY, INC.



Principal Place of Business Mailing Address
713-376 SANDY CT ALTAMONTE SPRINGS FL 32714
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3. Date Incorporated or Qualified **01/06/1995** 3a. Date of Last Report
4. FEI Number **59-3292894** 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

2. Principal Place of Business 2a. Mailing Address
21 **75 C E COLONIAL DR** 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 **ORLANDO FL** 28 City & State
24 Zip 25 **ORANGE** 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**GILLIS, GARY T
713-376 SANDY CT
ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
75 C E COLONIAL DR.
83
84 City **ORLANDO** FL 85 Zip Code **32801**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE DELETE
NAME **D/P GILLIS, GARY T**
STREET ADDRESS **713-376 SANDY CT**
CITY - ST - ZIP **ALTAMONTE SPRINGS FL 32714**
TITLE DELETE
NAME **D/V.P./S/T ANDERSON, THERESA J**
STREET ADDRESS **713-376 SANDY CT**
CITY - ST - ZIP **ALTAMONTE SPRINGS FL 32714**
TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 Change Addition
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS **624 BOARDMAN ST**
1.4 CITY - ST - ZIP **ORLANDO, FL 32801**
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)(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 Block 13, changed, or on an attachment with an address.

SIGNATURE: *Theresa Anderson* **THERESA ANDERSON VICE PRESIDENT** 1/23/96 407-837-0077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)