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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000025696 (2) **DOCUMENT #**

GARY HAUN ENTERPRISES, INC.

Principal Place of Business Mailing Address								
1666-67T SUITE 41	'H LANE NORTH	1666-67TH LANE NO SUITE 410 ST. PETERSBURG F	=					
V., 12,1					3. Date Incorporated or Qualified 03/31/1995	lified 3a. Date of Last Report N/A		
 -	Place of Business	2a. Mailing Address 26			4. FEI Number 5933 05	548		Applied For Not Applicable
Suite Apt	t. #, etc.	Suite, Apt. #, etc.			5. Cert-ficate of Status Desired		\$8.75	Additional Required
City & Sta	ate	City & State			Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
Ζιρ 24	Country 25 PINALAS	Z ₉ ;	30 Cou	ntry Piwellas	8. This corporation has liability for Florida Statutes Yus	₩ No		199.032,
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New I	registered A	gent	
NIESET, JAMES R 6740-D CROSSWINDS DRIVE NORTH				82 Street Addr	ress (P.Ö. Box Number is Not Acceptal	ole)		
					COS (15. DON TOWNS TO TOO TOO DOOP			
Sr. l	PETERSBURG FL 33710			83				
				84 City		FL	85 Zip	p Code
SIGNATURE	Signature, typed or printed name of registered agen			Agesit signafule require	el wher recision y: ADDITIONS/CHANGES TO OFF	EMTE FICERS AND	DIRECTO	DRS IN 12
TITLE	Director/President/Secretary/Tre			ITLE			Change	
NAME	Gary Haun		1.2 N/	1				
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6.4 City - \$1 - 7iP 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 certify 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 OR DIRECTOR GARY Haun

2/07/96

(813) 381-6811

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