FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

12995 S. CLEVELAND AVE SUITE 164

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

12995 S. CLEVELAND AVE



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000055322 (8)

GREG PAGE AND ASSOCIATES, INC.

| SUITE 164 | MARA | SUITE 164 | Pi 00001 0016 | ' | | | |
|----------------------|---|--|-----------------------------------|------------------|------------|-----------------|---|
| FT. MYERS FL 33907 | | FT. MYERS FL 33907-3875 | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 12/09/1996 |
| 2. Principal P | lace of Business | 2a. Mailini | g Address | | | | 4. FEI Number Applied For |
| 21 . | | 26 | | | | | 59-3228767 Not Applica |
| Suite, Apt. #, etc. | | Suite, | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| City & State | | City & State | | | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 | | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | | | Country | 1 | 8. This corporation has liability for Intangible tax under s. 199.032 |
| 24 | 25 | 29 | | 30 | | | Florida Statutes 🔲 Yes 📈 No |
| | Name and Address of Curre | nt Registered A | igent | | | | 10. Name and Address of New Registered Agent |
| PAG | E, GREGORY T | | | | 81 | Name | |
| 1299 | 5 S. CLEVELAND AVE | | | | 82 | Street A | Address (P.O. Box Number is Not Acceptable) |
| | E 164 | | | | | | |
| | AYERS FL 33907 | | | | | | |
| | | | | | 84 | City | FL 85 Zip Code |
| office or r | to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obti | e of Florida. Suc | h change was | author | ized by | y the corp | d corporation submits this statement for the purpose of changing its register reporation's board of directors. I hereby accept the appointment as registere |
| SIGNATURE | Signature, typod or printed name of registered a | nent and title if anning | hle (NO | TF: Regis | tered An | ant skaneture s | e required when reinstating) DATE |
| 12. | | ND DIRECTORS | - III | | 3. | on egrator. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | | DELETE | | 1 TITLE | | PRESIDENT Change Addi |
| NAME | PAGE, GREGORY T | | | 1 | .2 NAME | | DAGE COEMMEN T |
| STREET ADDRESS | 1855 WELLS RD #8 | | | 1 | 3 STREE | ADDRESS | PAGE, GREDORY Torve |
| CITY-ST-ZIP | ORANGE PARK FL 32073 | | | | 4 CITY - S | | A 33908 |
| TITLE | 0/10/10/2 1/10/11/12 02/01/0 | | DELETE | | 1 TITLE | 1 | Change Addi |
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| STREET ADDRESS | | | | 5 | 3 STREE | T ADDRESS | |
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| NAME | | | | 6 | 2 NAME | ' | |
| STREET ADDRESS | | | | . 6 | 3 STREE | T ADORESS | |
| CITY - ST - ZIP | | | | 6 | 4 CITY- | ST-ZIP | |
| informatio | on indicated on this annual report of | supplemental a | nnual report is | true ar | nd acc | urate and | stated in Section 119.07(3)(i), Florida Statutes. I further certify that the id that my signature shall have the same legal effect as if made under oath; |
| I am an c appears | ifficer or director of the corporation in Block 12 or Block 13 if changed, | or the receiver of or on an attachn | r trustee empo nent with an ac | wered Idress. | to exe | cute this re | report as required by Chapter 607, Florida Statutes; and that my name |

T. PAGE 2-11-97