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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000059760 (5)

GORHAM INTERNATIONAL, INC.

FILED Apr 27 1998 8:00am Secretary of State



r milicipal riaci	e or business	Mailing Addres	55			
1086 FOREST LAKES DR #302 NAPLES FL 34105			1086 FOREST LAKES DR #302 NAPLES FL 34105			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
<u> </u>		<u>1 '- ' </u>	 .			08/01/1995
<u> </u>	lace of Business		2a. Mailing Address			4. FEI Number Applied For
21		26				65-0643788 Not Applicable
Suite, Apl	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			6. Certificate of Status Desired See Required
City & State	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	8			Trust Fund Contribution Added to Fees
Zip	Country			Country		
24	26	29	30	30		Personal Property Tax due June 30. Yes No
	9, Name and Address of Curre			Π.		10. Name and Address of New Registered Agent
EAG	RRANT, ALBERT R			81	N	Name
1945 FAIRVIEW DR				82 Street Address (P.O. Box Number is Not Acceptable)		
EN	GLEWOOD FL 34223		<u></u>			
				83	Ί	
}				84	1 7	City 85 Zip Code
						`
11. Pursuant l	to the provisions of Sections 607.050	02 and 607.1508, Flo	rida Statutes, th	e abov	e-na	-named corporation submits this statement for the purpose of changing its registered
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	Signature, typed or printed name of registered ag-	ent and title if applicable	(NOTE: Regi	slered Ape	eni sio	ni signature required when reinstating) DATE
12.		D DIRECTORS		13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	.1 TITLE		Change Addition
NAME	FARRANT, ALBERT R			.2 NAME		
STREET ADDRESS	1945 FAIRVIEW DR			.3 STREET	T ADAD	ADDDCCC
1 1	ENGLEWOOD FL 34223					
CITY-ST-ZIP TITLE				A CITY-S	SI-ZIP	I-ZIP ☐ Change ☐ Addition
1 !	D	السا				Li change Li Addition
NAME	BELISLE, ALFRED E		•	2.2 NAME		
STREET ADDRESS	1086 FOREST LAKES DR #3	02		3 STREET		1
CITY-ST-ZIP	NAPLES FL 34105			. 4 CITY-	ST-ZII	
TITLE		النا	DELETE :	3.1 TITLE		Change Addition
NAME				2 NAME		j
STREET ADDRESS			1 3	3 STREET	T ADDR	ADDRESS
CITY-ST-ZIP				3.4. CITY-1	ST-ZIF	T-ZIP
THTLE				.1 TITLE		☐ Change ☐ Addition
NAME				. 2 NAME		
STREET ADDRESS				I.3 STREET	T ADDR	Arnares
CITY-ST-ZIP				.4 CITY-S		I
TITLE		П		1 THLE	31-EIF	☐ Change ☐ Addition
NAME		٠.		2 NAME		_ January _ January
			3			
STREET ADDRESS			1	.3 STREET		
CITY-ST-ZIP				4 CITY-S	ST-ZIP	
TITLE			DELETE	.1 TITLE		Change Addition
NAME				.2 NAME		
STREET ADDRESS			Į t	3 STREET	ADDR	ADDRESS
CITY-ST-ZIP				4 CITY-S	ST - ZIP	′- ZIP

14. I hereby certify that 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 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 if changed, or on an attachment with an address.

4/18/08