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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

1997

DOCUMENT # P95000060698 (4)

GUMBALLS & MORE, INC.

Principal Place of Business

Mailing Address

FILED May 12 1997 8:00am Secretary of State



| LDOUNE 1E | CK CIRCLE 32935 | 2004 ADIRONDACK CIRCLE MELBOUNE FL 32835-3375 | · | 3. Date Incorporated or Qualified | Sa. Date of Last Repor | |
|--|--|--|--|--|---|-------------------------|
| | | | | 06/07/1995 | 04/25/1996 | |
| | ace of Business | 2a. Mailing Address | | 4. FEI Number | Applier | d For |
| 3401 | Wolf Creek Drive | 26 2401 WOIF | Cicek Drive | 59-3339696 | Not Ap | |
| Suite, Apt | | Suite, Apt. #, etc. | : | 5. Certificate of Status Desired | \$8.75 Addit | |
| City & State | ourse Florida | City & State 28 Mc/bame | Plorish | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Added to Fe | |
| 329. | | | SO S USA | | Yes XNo | 9.032, |
| | Name and Address of Currer | nt Registered Agent | | 10. Name and Address of New Reg | pistered Agent | |
| | ue, Brian K | | B1 Name | Keum A. Phunn | | |
| | ADIRONDAÇK CIRCLE | | 82 Street Add | dress (P.Q. Box Number is Not Acceptable | (e) | ···· |
| J MELE | 30UNE FL 3 283 5 | | 040 | Ol Wolf Creek L | lrive | |
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| | . ///// | | 84 City 1 | . 41 | 85 Zip Code | 6 |
| | | | 1'16 | Ibourne | FL 3293 | £(- |
| I. Pursuanti | to the provisions of Sections 607.050 | 2 and 607 1508, Florida Statute | is, the above-named co | rporation submits this statement for the pu | urpose of changing its reg | gistere |
| agent. La | m familiar with, and accounted the | ations of, Section 607.0505.0Flo | rida Statutas. | ation's board of directors. I hereby accep | t the appointment as regit | 310100 |
| | | - Kau | N £4 | veri 4/ | 30/97 | |
| SELECTION | | | | | | |
| GNATURE | Signated typic or prined name of registered agr | ent and title if applicable (NOTE | Registered Agent signature requ | ulred when reinstating) | DATE | |
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14. I do hereby certify that the information supplied with this filing does not quality 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 charged, or open attachment with an address.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/57

407-253-9661

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