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

PROFIT CORPORATION ANNUAL REPORT

1997

I do hereby certify that the information s information indicated on this annual region



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 13 1997 8:00am

Secretary of State

DOCUMENT # P95000069266 (1)

GREGORY S. SCHERER ENTERPRISES, INC.

Principal Place of Business Mailing Address						(10010001 (10)0101 61(11 0011 0011 0011 0011 0011 1011 1				
4154 TROUT A MILTON FL 32:		4154 TROUT AVE MILTON FL 32583-8542	4154 TROUT AVE							
MILION IL VA	•••	WILLIAM IE DEDOUGTE								
						3. Date Incorporated or Qualified 09/08/1995	3a. Date of 05/01/19		ort	
	lace of Business	2a, Mailing Address			4. FEI Number		·· — - T · - ·	lied For		
21	······································	[26]			-APPLIED FOR- 59-34/5089 Not Applicable					
Suite, Apt.	#, etc.	Suite, Apl. #, etc.			5. Certificate of Status Desired	\$8	3.75 Ad			
22		27					Fee Req			
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be					
Zip	Country	28			Trust Fund Contribution Added to Fees					
	<u></u>	Zip	h n	ountry			ias liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Currer	29	[30]	Ţ		Florida Statutes Yes No 10. Name and Address of New Registered Agent				
ec.	IERER, GREGORY S		8.	l Nar	no	IV. Hame Blu Address of New Re	gistered Agen	·		
	4 TROUT AVE									
	TON FL 32583		82	82 Street Address (P.O. Box Number is Not Acceptable)						
MIL	ION PL 32303		8:	3						
			"							
			84	City	/		FL 85	Zip Cc	ode	
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statu	ites, the above	⊥ ⁄e-nan	ed corne	oration submits this statement for the		Ciper ite	registered	
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	authorized t Iorida Statute	y tho es.	corporation	oration submits this statement for the p on's board of directors. I hereby acce	pt the appointm	ent as re	gistered	
SIGNATURE										
12,	Signature, typed or printed name of registered agr OFFICERS AN		P*E. Firgistered Ap. 13.	kira sign	dare require	d when registaling) ADDITIONS/CHANGES TO OFFIC	DATE.	OTODO		
TITLE	PCEO	DETETE	11 117 LE		[ADDITIONS/CHANGES TO OFFIC		hange	Addition	
NAME	SCHERER, GREGORY S.		1.2 NAME				U v	ticitite	L_J Magrion	
STREET ADDRESS	4154 TROUT AVE			1 Author	oe.					
CITY-ST-ZIP	MILTON FL 32583		1.3 STREE 1.4 C/TY-		33					
TITLE	S/T	DELETE	21 THLE	31 - ZIF				hange	Addition	
NAME	SCHERER, LOIS L.	——	2 2 NAM:					. a.i.g.	7,00000	
STREET ADDRESS	11 W. HOPE DR.		2 3 STREE		ςς .					
CITY-ST-ZIP	PENSACOLA FL 32534		2.4 C(1Y			.*				
TITLE		DOTELE	3.1 111(E	J 211				hange	Addition	
NAME		_	3.2 NAME					a- 1		
STREET ADDRESS			3.3 \$1RE		ss l					
CITY-ST-ZIP			3.4 CITY							
TITLE	,	DELFTE	4.1 1071.6				□с	hange	Addition	
NAME			4. 2 NAMI							
STREET ADORESS			4.3 STREE	1 ADDRE	ss					
CITY-ST-ZIP			4.4 CITY-							
TITLE		DELETE	5.1 111 £ E					hange	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	I AOORE	ss					
CITY-ST-ZIP			5.4 CITY-	S1 - 7IP						
TITLE		DELETE	6 1 1 I I L E				C	hange	Addition	
NAME			62 NAME							
STREET ADDRESS			63 STREE	1 ADDRE	SS					
					1				1	

Sling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the stat annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that ver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name tachment with an address.