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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000082369 (6)

GARDNER & GOLDWIRE, INC. Principal Place of Business Mailing Address 2826 SHADER ROAD 2826 SHADER ROAD ORLANDO FL 32808 ORLANDO FL 32808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/26/1995 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-3341012 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Zip Country ZiD 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes Yes 20 24 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PAYNE, MARC A 2826 SHADER ROAD Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32808 83 84 85 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELLTE 1.1 TITLE Change Addition TITLE GOLDWIRE, JOHN L NAME 1.2 NAME 131 SEABREEZE CIRCLE STREET ADDRESS 1.3 STREET ADORESS JUPITER FL 33477 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition NAME GARDNER, FREDERICK A 2.2 NAME STREET ADDRESS 9727 SOUTH WEST 55TH ROAD 2.3 STREET ADDRESS **GAINESVILLE FL 32608** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition 51 TITLE 52 NAME NAME 5 3 STREFT ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TITLE 61 TITLE Change 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS

14. Thereby 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 in the receiver or trusted enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes on on an attachment with a fiddress.

CITY-ST-ZIP

SIGNATURE:

1/24/38

CR2ES4

**FILED** 

Mar 13 1998 8:00am

Secretary of State