

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90015 050 ***150.00

DOCUMENT # **P95000082479**

Corporation Name

GOUZE & ASSOCIATES, P.A.



Principal Place of Business

200 CENTRAL AVE. SUITE 2210
ST. PETERSBURG FL 33701
JS

Mailing Address

200 CENTRAL AVE. SUITE 2210
ST. PETERSBURG FL 33701
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1995

Principal Place of Business

200 Central Ave

Suite, Apt. #, etc.

2210

City & State

St. Petersburg FL

Zip

33701

Country

USA

2a. Mailing Address

200 Central Ave

Suite, Apt. #, etc.

2210

City & State

St. Petersburg, FL

Zip

33701

Country

USA

4. FEI Number

59-3351640

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

GOUZE, CATHERINE E
200 CENTRAL AVE.
SUITE 2210
ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

I, 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

Catherine E. Gouze
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7/2/99

OFFICERS AND DIRECTORS

LE	PD	<input type="checkbox"/> DELETE
WE	GOUZE, CATHERINE E	
REET ADDRESS	200 CENTRAL AVE, 2210	
Y-ST-ZIP	ST. PETERSBURG FL	
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		
LE		<input type="checkbox"/> DELETE
WE		
REET ADDRESS		
Y-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE:

Catherine E. Gouze
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/99 **727-823-0997**
Date Daytime Phone #

CR2E034 (5/99)

0089580

P95000082479
583414-90015-50
GOUZE & ASSOCIATES, P.A.

NationsBank Tower
200 Central Avenue
Suite 2210
St. Petersburg, FL 33701

Phone: (727) 823-0997

Fax: (727) 823-6991

Catherine E. Gouze

July 2, 1999

Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Gouze & Associates, P. A.
Annual Report
Document # P95000082479

Dear Sir or Madam:

Enclosed herewith please find my check in the amount of \$150.00 which represents the amount for the 1999 Annual Report. I previously was at Suite 1510 in this building, but moved to Suite 2210. I properly provided the suite change to you all, and the change was made, but unfortunately, Suite 1510 was still left on the address. I enclose a copy of the mailing label which shows the same, as is evident on the report itself. I never received the Annual Report because of the address problem.

Accordingly, kindly accept the \$150.00 and waive the requested \$400.00 late penalty. I appreciate your attention to this matter. Also, kindly make sure that the address problem is corrected so that there is not a problem next year.

If you have any questions or comments, please call me at the above telephone number.

Sincerely,

Catherine E. Gouze
Catherine E. Gouze

CEG:mj
enc.