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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

[℃]May 26 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090255 (7)

	'L GOWDY INTERNATIONAL.				
Principal Plac	e of Business	Mailing Address		6 1221/000 1/0 (0)01 0/31/ 00/14 00/11 02/11 02	ila ikidi darım ildər bisbi bita ibdi
139 NORTH COUNTY ROAD 139 NORTH COUNTY RO		AD			
		STE #20A		DO NOT WRITE IN	THIS SPACE
PALM BEACH FL 33480 US		PALM BEACH FL 33480 US		3. Date Incorporated or Qualified	
**		00		11/22/1995	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0627744	Not Applicable
Suite, Apt	#. etc.	Suite, Apt. #, etc.		_	¢0.75 4 4 400 - 1 - 1
22	, 212.	27		5. Certificate of Status Desired	Fee Required
		City & State		Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid th	· - - · · · · · · · · · · · · · · · · · ·
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Regist	ered Agent
GOWDY, CHERYL A			81 Name		
139 N COUNTY ROAD			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
STE #20A			Oliver Addin	ess (i .o. box Number is Not Acceptable)	
PALM BEACH FL 33480			83		
,,,	EN BENCH LE COTOS		21 00		
			84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Eurida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as register					
office or registered agent, or both, in the State of Lorida. 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	, , , ,	. ,			
SIGNATORE	Signature, typed or printed name of registerest agent	and literal symplicable (NO°)	Registered Agent signature require	ed when reinstating) D	ATE.
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PS D	L DELE TE	1.1 TITLE		☐ Change ☐ Addition
NAME	GOWDY, CHERYL A		1.2 NAME		
STREET ADORESS	525 SOUTH FLAGLER DRIVE, A	APT. 9B	1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 City - St - ZiP		
TITLE	VPD	DELETE	2 1 TITLE		Change Addition
NAME	GOWDY, CURT		2.2 NAME		
STREET ADDRESS	525 SOUTH FLAGLER DRIVE, A	NPT. 9B	2 3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CITY - ST - ZIP		
TITLE	VPD	DELETE	3.1 THLE		Change Addition
NAME	GOWDY, JERRE		3.2 NAME		
STREET ADDRESS	525 SOUTH FLAGLER DRIVE, A	NPT. 9B	3.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		3.4. CITY-ST-ZIP		
TITLE	Ť	FELE TE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	ALMY, LINDA S		4. 2 NAME		
Stréet address	2300 PALM BEACH LAKES BLY	/D	4.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM EBACH FL	-	4.4 CITY-ST-ZIP		
TITLE	L THE STATE OF THE	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TILE		Change Addition
NAME			62 NAME		
			I		
STREET ADDRESS			63 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 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 in an attraction with an address.