

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

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**May 01 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000020461 (5)

1. Corporation Name
GINGERICH TRUCKING, INC.



Principal Place of Business 1605 MAIN ST. SUITE 1001 SARASOTA FL 34236	Mailing Address 1605 MAIN ST. SUITE 1001 SARASOTA FL 34236-5861
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3. Date Incorporated or Qualified 03/06/1996	3a. Date of Last Report
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2. Principal Place of Business 21 1323 Francis Ave Suite, Apt. #, etc.	2a. Mailing Address 26 1323 Francis Ave Suite, Apt. #, etc.	4. FEI Number 65-0646878	Applied For Not Applicable
22 City & State 23 Sarasota, FL.	27 City & State 28 Sarasota, FL.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24 Zip 34232 25 Country USA	29 Zip 34232 30 Country USA	8. This corporation has liability for Intangible Tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**GOLDSMITH, STANLEY A
1605 MAIN ST, SUITE 1001
SARASOTA FL 34236**

10. Name and Address of New Registered Agent
81 Name **Irwin, Ed**
82 Street Address (P.O. Box Number is Not Acceptable)
4911 14th St. West, Suite # 103
83
84 City **Brandenton, FL** 85 Zip Code **34207**

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: Edwin H. Irwin DATE: **4-25-97**
Signature typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	GINGERICH, DONALD L	
STREET ADDRESS	1323 FRANCIS AVE	
CITY - ST - ZIP	SARASOTA FL 34232	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GINGERICH, CHERYL A	
STREET ADDRESS	1323 FRANCIS AVE	
CITY - ST - ZIP	SARASOTA FL 34232	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DPASAT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	GINGERICH, DONALD L.	
1.3 STREET ADDRESS	1323 Francis Avenue	
1.4 CITY - ST - ZIP	Sarasota, FL 34232	
2.1 TITLE	DVPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	GINGERICH, CHERYL A.	
2.3 STREET ADDRESS	1323 Francis Avenue	
2.4 CITY - ST - ZIP	Sarasota, FL 34232	
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		

14. I do 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: Donald L. Geringich DATE: **3/3/97** DAYTIME PHONE #: **941-371-6562**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)