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FILED  
Apr 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000031459 (6)

1. Corporation Name  
G & S SCHOLDERER, INC.

Principal Place of Business  
664 S. GULFVIEW BLVD.  
CLEARWATER BEACH FL

Mailing Address  
664 S. GULFVIEW BLVD.  
CLEARWATER BEACH FL 34638-2642



2. Principal Place of Business

21 Suite, Apt. #, etc.

2 City & State

2 Zip 33767

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 33767

Country

3. Date Incorporated or Qualified

04/10/1996

3a. Date of Last Report

4. FEI Number

65-0668745

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LOGAN, FRANK C  
121 NORTH OSCEOLA AVENUE  
SUITE 300  
CLEARWATER FL 34615

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME LOGAN, FRANK C  
STREET ADDRESS 121 NORTH OSCEOLA AVENUE, SUITE 300  
CITY-ST-ZIP CLEARWATER FL 34615

TITLE President & D ☐ DELETE

NAME George H. Scholderer  
STREET ADDRESS 664 S. Gulfview Blvd  
CITY-ST-ZIP Clearwater Beach, FL 33767

TITLE Secretary D ☐ DELETE

NAME Sally M. Scholderer  
STREET ADDRESS 664 S. Gulfview Blvd  
CITY-ST-ZIP Clearwater Beach, FL 33767

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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; that I am the registered agent 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 of this report or in the corporation's address.

CR2E034 (9/96)