

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

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P96000032528 (7)
 1. Corporation Name
GENERAL RESOURCE SERVICES, INC.



Principal Place of Business 6080 OLD BETHEL ROAD CRESTVIEW FL 32536	Mailing Address 6090 OLD BETHEL ROAD CRESTVIEW FL 32536
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 GENERAL RESOURCE SERVICES, INC.	2a. Mailing Address 26 GENERAL RESOURCE SERVICES, INC.	3. Date Incorporated or Qualified 04/09/1996	4. FEI Number 59-3374567	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
22 219 GREENBRIER DR.	27 219 GREENBRIER DR.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
23 FT. WALTON BEACH, FL 32547	28 FT. WALTON BEACH, FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
24 32547 25 USA	29 32547 30 USA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent
**CARR, MICHAEL
 219 GREENBRIER
 FT. WALTON BEACH FL 32547**

10. Name and Address of New Registered Agent

81 Name	N/A
82 Street Address (P.O. Box Number is Not Acceptable)	N/A
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 **MICHAEL WINSTON CARR (PRESIDENT/DIRECTOR)** *Michael W Carr* **1-20-98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when amending) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CARR, MIKE	
STREET ADDRESS	219 GREENBRIER	
CITY-ST-ZIP	FT. WALTON BEACH FL 32547	
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	P/D/C	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	CARR, MIKE W.	
1.3 STREET ADDRESS	219 GREENBRIER DRIVE	
1.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
2.1 TITLE	V/T/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	CARR, DALE U.	
2.3 STREET ADDRESS	219 GREENBRIER DRIVE	
2.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
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 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 *Michael W Carr* **1-20-98**

CR2E034 (10/97)