

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

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Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000057064 (3)

1. Corporation Name
GENESI FAMILY CORP.



Principal Place of Business 5212 - 62ND AVE. SOUTH ST. PETERSBURG FL 33715	Mailing Address 5212 - 62ND AVE. SOUTH ST. PETERSBURG FL 33715-2403
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3. Date Incorporated or Qualified 07/08/1996	3a. Date of Last Report NA
4. FEI Number 59-3389722	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	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent GENESI, ROBERT C 5212 - 62ND AVE. SOUTH ST. PETERSBURG FL 33715	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME		1.2 NAME	C/D Chairman/CEO/Director Robert C. GENESI
STREET ADDRESS		1.3 STREET ADDRESS	5212 62nd Ave South
CITY-ST-ZIP		1.4 CITY-ST-ZIP	St. Petersburg, Florida 33715
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME		2.2 NAME	D Director MARK GENESI
STREET ADDRESS		2.3 STREET ADDRESS	110 Charlene Street
CITY-ST-ZIP		2.4 CITY-ST-ZIP	North Adams, Mass. 01247
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME		3.2 NAME	P/T/D President/Treasurer/Director John A. GENESI
STREET ADDRESS		3.3 STREET ADDRESS	1600 Country Trails Dr
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Safety Harbor, FL 34695
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
NAME		4.2 NAME	D Director Matthew G. GENESI
STREET ADDRESS		4.3 STREET ADDRESS	41810 John Muir Drive
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Coarsegold, CA 93614
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☒ Addition
NAME		5.2 NAME	D Director Laurie A. GENESI
STREET ADDRESS		5.3 STREET ADDRESS	6710 Ardwell Drive
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Canal Winchester, Ohio 43110
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: **John A. GENESI** *John A. Genesi* 3/13/97 (813) 725-0544
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)