

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 05 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 # P96000068382 (6)					
1. Corporation Name GARY G. HALVERSON INC.					
Principal Place of Business 5043 CROSS POINTE DRIVE OLDSMAR FL 34677			Mailing Address 5043 CROSS POINTE DRIVE OLDSMAR FL 34677		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 3450 East Lake Rd			2a. Mailing Address 26 3450 East Lake Rd		
Suite, Apt. #, etc. 22 202			Suite, Apt. #, etc. 27 202		
City & State 23 Palm Harbor, FL			City & State 28 Palm Harbor, FL		
Zip 24 34685			Zip 29 34685		
Country 25 USA			Country 30 USA		
9. Name and Address of Current Registered Agent HALVERSON, GARY G 5043 CROSS POINTE DRIVE OLDSMAR FL 34677			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		
			FL		
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					
1.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP					
P GARY G. HALVERSON 5043 CROSS POINTE DR. OLDSMAR FL					
1.2 NAME STREET ADDRESS CITY-ST-ZIP					
S DIANE EGAN 5043 CROSS POINTE DR. OLDSMAR FL					
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3. Date Incorporated or Qualified 08/15/1996	
4. FEI Number 59-3400383	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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	
FL	

SIGNATURE:

Gary G. Halverson

7-15-98

727-789-6742

CR2E034 (5/98)