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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000080350 (7)

## FILED May 01 1998 8:00am Secretary of State

	GENERAL SERVICES, INC.	.,				
Principal Place of Business Mailing Address						
3004 NE 17TH TERRACE 3004 NE 17TH TERRA GAINESVILLE FL \$2609 GAINESVILLE FL \$260					DO NOT WRITE IN T	HIS SPACE
}					3. Date Incorporated or Qualified	IIO OF AGE
					09/26/1996	
	pat Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21	26				59-3437034	Not Applicable
Suite, Apt. #, etc.         Suite, Apt. #, etc.           22         27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			·		6. Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees
Zip	Country				8. This corporation owes or has paid the	
24	25		30		Personal Property Tax due June 30.	Yes M. No
	9. Name and Address of Curren	it Hegistered Agent		1 Name	10. Name and Address of New Registe	red Agent
LEWIS, WALTER				Ivame		
3004 NE 17TH TERRACE			8	2 Street Add	fress (P.O. Box Number is Not Acceptable)	
W	VINESVILLE FL 32609		8	3		
Į.			٢			
			8	4 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statute	es the abo	ve-named cor		
office or I	registered agent, or both, in the State im familiar with, and accept the obliga	of florida Such change was a	ulhorized I	by the corpora	poration submits this statement for the purpo ation's board of directors. I hereby accept the	appointment as registered
i -	in lanina win, and accept the obliga	ntions of, Section 607,0000, Flo	ilida Slatut	J5.		
SIGNATURE	Signature, typed or printed name of registered age	int and frie if applicable (NOte	Registered A	gent signature requ	ired when reinstating) DA	TE S
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	L] DELETE	1.1 TITLE	ļ		Change Addition
NAME	LEWIS, WALTER		1.2 NAM	E [		2
STREET ADDRESS	- <del>7</del> -		1.3 STRE	ET ADDRESS		يُ
CITY-ST-ZIP	GAINESVILLE FL 32609			-ST-ZIP		
TITLE	D THE THE	DELETE	21 TITLE	ì		Change Addition
NAME	LEWIS, THELMA		2 2 NAM	1		
STREET ADDRESS	1			ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY 3.1 TITLE			Change Addition
TITLE NAME	HUTCHINSON, DEWAYNE	רין מנוננונ	3.1 TREE	ì		Ondays Modia(ii)
	5003 SW 69TH TERR			ET ADDRESS		
STREET ADDRESS	OANICO HILE CL COCCO		3.3 SINE 3.4. CITY			
CITY-ST-ZIP TITLE	D	DELETE	4.1 TITLE			Change Addition
NAME	HUTCHINSON, SANDRA		4. 2 NAM	i i		
STREET ADDRESS	5003 SW 69TH TERR			ET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL 32608		4.4 CITY	· · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	51 TOLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				ET ADDRESS		İ
CITY-ST-ZIP			5.4 CITY	į.		J <sub>i</sub>
TITLE			6.1 TITLE			Change Addition
NAME			6.2 NAM			
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-SY-ZIP			6.4 CITY	ST-ZIP		

4. 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.

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25 April 96