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Jun 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000084345 (3)

1. Corporation Name  
G.S. INVESTMENTS, INC.



Principal Place of Business

~~1340 TUSKAWILLA ROAD  
WINTER SPRINGS FL 32708~~

1649 South Kirkman Rd  
#173  
Orlando, Florida 32811

Mailing Address

~~1340 TUSKAWILLA ROAD  
WINTER SPRINGS FL 32708~~

SAME

2. Principal Place of Business

21 1649 S. Kirkman Rd.  
Suite, Apt. #, etc.  
#173

2a. Mailing Address

26 1649 S. Kirkman Rd.  
Suite, Apt. #, etc.  
#173

23 City & State

Orlando, FL

28 City & State

Orlando, FL

24 Zip

32811

25 Country

USA

29 Zip

32811

30 Country

USA

9. Name and Address of Current Registered Agent

GLAVIN, GRACE A  
1340 TUSKAWILLA ROAD  
WINTER SPRINGS FL 32708

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 file if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	STANSBURY, GARY W	
STREET ADDRESS	1101 MEADOW LAKE WAY APT-101	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	Owner	Change	Addition
1.2 NAME	Gary W. Stansbury		
1.3 STREET ADDRESS	1649 South Kirkman Rd #173		
1.4 CITY-ST-ZIP	Orlando, Florida 32811		
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 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:

*Gary W. Stansbury*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-3-97

407 560 2621

Date

Daytime Phone

CR2E034 (9/96)