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May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997

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



DOCUMENT # P96000086010 (1)

1. Corporation Name  
GREAT AMERICAN TECHNOLOGIES, INC.



Principal Place of Business  
5200 N.W. 43RD ST  
SUITE 102-147  
GAINESVILLE FL 32606

Mailing Address  
5200 N.W. 43RD ST  
SUITE 102-147  
GAINESVILLE FL 32606-4484

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 2137 HILLSGATE ST		26 2137 HILLSGATE ST		10/17/1996	
22 SUITE 100		27 SUITE 100		4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
23 LAS VEGAS NV		28 LAS VEGAS NV		5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
24 89134		29 89134		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
25 USA		30 USA		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
KETCHEL, MARC RT 3 BOX 32-G ALACHUA FL 32615		81 Name ANDREW F. CAUTION 82 Street Address (P.O. Box Number is Not Acceptable) 29425 C.R. 561 83 84 City TAVARES FL 85 Zip Code 32778	

11. Pursuant to the provisions of Sections 607.0505 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: *Andrew F. Caution* ANDREW F. CAUTION DIRECTOR 4/30/97  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	DELETE <input checked="" type="checkbox"/>	1.1 TITLE DIR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME KETCHEL, MARC		1.2 NAME ANDREW F. CAUTION	
STREET ADDRESS RT. 3 BOX 32-G		1.3 STREET ADDRESS 29425 C.R. 561	
CITY-ST-ZIP ALACHUA FL 32615		1.4 CITY-ST-ZIP TAVARES FL 32778	
TITLE D	DELETE <input type="checkbox"/>	2.1 TITLE DIR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME WATWOOD, STEPHEN F		2.2 NAME JACQUES DESROCHERS	
STREET ADDRESS 17835 RCR 29		2.3 STREET ADDRESS 7063 MIRAVISTA	
CITY-ST-ZIP OAK CREEK CO 80467		2.4 CITY-ST-ZIP LAS VEGAS NV 89120	
TITLE D	DELETE <input checked="" type="checkbox"/>	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BONHAM, RICHARD		3.2 NAME	
STREET ADDRESS 1534 MT EVANS DR		3.3 STREET ADDRESS	
CITY-ST-ZIP LONGMONT CO 80501		3.4 CITY-ST-ZIP	
TITLE D	DELETE <input checked="" type="checkbox"/>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ESCALLE, ROBERT D		4.2 NAME	
STREET ADDRESS 312 CHEYENNE DR		4.3 STREET ADDRESS	
CITY-ST-ZIP BERTHOD CO 80513		4.4 CITY-ST-ZIP	
TITLE D	DELETE <input checked="" type="checkbox"/>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROBINSON, JOHN S		5.2 NAME	
STREET ADDRESS 60 DUNE ST APT A		5.3 STREET ADDRESS	
CITY-ST-ZIP ST AUGUSTINE FL 32084		5.4 CITY-ST-ZIP	
TITLE D	DELETE <input type="checkbox"/>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME VESTER, JOHN C		6.2 NAME	
STREET ADDRESS 3515 WIMBERLY WAY		6.3 STREET ADDRESS	
CITY-ST-ZIP POWER SPRINGS GA 30073		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, only as an addendum with an address.

SIGNATURE: *Andrew F. Caution* ANDREW F. CAUTION DIRECTOR 4/30/97 702/2339360  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)