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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000031955

GILMORE HOLDINGS; INC.

May 03, 1999 8:00 am Secretary of State

05-03-1999 90076 003 ***150.00



724 MANATEE		BRADENTON FL 34205				
RADENTON F	L 34205	BHADENTON PL 34203		DO NOT WRITE IN T	HIS SPACE	
				3. Date Incorporated or Qualifed		
		1 - 14		04/01/1997 4. FEI Number		
	Place of Business	2a. Mailing Address				ed For
	Third Ase w	26		59-3447402		pplicable
Suite, Apt.	350 _	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Add	I
City & Stat	radenton, FC	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F	
Zip 34	205 25 Country	Zip 3	Country	This corporation owes the current year Personal Property Tax.]No
<u>*1 - </u>	9. Name and Address of Current		<u> </u>	10. Name and Address of New Register	red Agent	
	MORE, DANIEL L 4 MANATEE AVE WEST		81 Name OAWIEL L. G. MOCE 82 Street Address (P.O. Box Number is Not Acceptable) 1001 Third Ave (P.O. Box Number is Not Acceptable)			
Bra	DENTON FL 34205		83			
				<u>·</u>		
						a <u>e</u> 5
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was auti tions of, Section 607.0505 AFlorid	nonzed by the corporati Ią Statutes.	poration submits this statement for the purposion's board of directors. I hereby accept the ap	ppointment as regis	Neieu
SIGNATURE	и .	رندالات الماليير	more		4-29-99	1
JIGHATOKE	Signature, typed or printed name of registered agent		egistered Agent signature require			
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS		
MTLE .	P	☐ DELETE	1,1 TITLE		☐ Change	Addition
NAME	GILMORE, DANIEL L		1,2 NAME	HONE		
STREET ADDRESS	1303 91ST CT NW		1.3 STREET ADDRESS	0000		ļ
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY-ST-ZIP	\		
TITLE		☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME			2.2 NAME	•		
STREET ADDRESS	;		2.3 STREET ADDRESS		e e se over	}
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		····	
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME	× ·		3.2 NAME			
STREET ADDRESS	The state of the s		3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS	·		4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	·	☐ Change	☐ Addition
NAME	}		5.2 NAME			}
STREET ADDRESS			5.3 STREET ADDRESS	· .		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE 1	;	☐ DELETE	6.1 TITLE		Change	Addition
	Į.		62 NAME			

14. 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, with all other like empowered.

SIGNATURE:

SIGNATURE:

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP