


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

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90130 044 \*\*\*158.75

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000059264**

1. Corporation Name

**GULF ATLANTIC HOLDING COMPANY**



Principal Place of Business

1545 RAYMOND DIEHL ROAD  
3RD FLOOR  
TALLAHASSEE FL 32308

Mailing Address

P.O. BOX 12200  
TALLAHASSEE FL 32317-2200

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**07/03/1997**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

30

4. FEI Number

**59-3508690**

Applied For

Not Applicable

5. Certificate of Status Desired **XX**

**\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00** May Be Added to Fees

8. This corporation owes the current year, Intangible Personal Property Tax. **XX** Yes ☐ No

9. Name and Address of Current Registered Agent

**MATLOCK, GEORGE V**  
**1545 RAYMOND DIEHL ROAD**  
**3RD FLOOR**  
**TALLAHASSEE FL 32308**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>C/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>JACOBS, JOSEPH W</b>	1.2 NAME	
STREET ADDRESS	<b>1522 BELLEAU WOOD DRIVE</b>	1.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP	<b>TALLAHASSEE FL</b>	1.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>
TITLE	<b>C</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<b>D/P</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>NEER, HOWARD L DO</b>	2.2 NAME	<b>McCann, John D.</b>
STREET ADDRESS	<b>5840 S.W. 8TH ST</b>	2.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP	<b>PLANTATION FL 33317</b>	2.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>
TITLE	<b>S</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BARKER, JAMES H</b>	3.2 NAME	<b>Atkins, Kathleen B.</b>
STREET ADDRESS	<b>13312 GOLF CREST CIRCLE</b>	3.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP	<b>TAMPA FL 33624</b>	3.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>OLIVA, MARCELINO DO</b>	4.2 NAME	<b>Eckerlein, R.F., DPM</b>
STREET ADDRESS	<b>1426 HALE ROAD</b>	4.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP	<b>DADE CITY FL 33525</b>	4.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>
TITLE	<b>T</b> <input type="checkbox"/> DELETE <input checked="" type="checkbox"/>	5.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>MCDEVITT, FRANK DO</b>	5.2 NAME	<b>Patterson, Todd, DO</b>
STREET ADDRESS	<b>39475 CHAMPION COURT</b>	5.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP	<b>NORTHVILLE MI 48167</b>	5.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<b>S</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	<b>Matlock, George V.</b>
STREET ADDRESS		6.3 STREET ADDRESS	<b>1545 Raymond Diehl Rd., 3rd Floor</b>
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<b>Tallahassee, FL 32308</b>

14. 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, with all other like empowered.

SIGNATURE:

 **George V. Matlock**

4/26/99

396-1115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

P97000059264

444881-90130-44

ATTACHMENT TO 1999 ANNUAL REPORT FOR  
GULF ATLANTIC HOLDING, CO.

<i>TITLE NAME STREET ADDRESS CITY-ST-ZIP</i>	<input type="checkbox"/> Delete	<i>TITLE NAME STREET ADDRESS CITY-ST-ZIP</i>	T <input type="checkbox"/> Change <input type="checkbox"/> Addition THOMPSON, WILLIAM J. (BILL) 1545 RAYMOND DIEHL RD., 3RD FLOOR TALLAHASSEE, FL 32308
<i>TITLE NAME STREET ADDRESS CITY-ST-ZIP</i>	<input type="checkbox"/> Delete	<i>TITLE NAME STREET ADDRESS CITY-ST-ZIP</i>	<input type="checkbox"/> Change <input type="checkbox"/> Addition