## 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 #** 1. Corporation Name

GCI(FLA), Inc.

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90284 001 \*\*\*150.00

Principal Place of Business Mailing Address										
98 Alexandria Pike Warrenton, VA 20186		same				DO NOT WRITE IN TH	IIS SPAC	E		
						3. Date Incorporated or Qualifed 8-29-97				
2. Principal I	Place of Business	2a. Mailing Address				4. FEI Number		Applied For		
21		26				58-2342814		Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5 Certificate of Status Desired		.75 Additional ee Required			
City & State City & State 28					6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees			
Zip <b>24</b>	Country 25	Zip 29	Со. <b>30</b>	intry		This corporation owes the current year     Personal Property Tax.	Intangible Ye	_/		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
				81	Name					
Thomas Scanlon 255 S. Orange St. #100 Orlando, FL 32801				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
				83						
				84	City	F	L 85	Zip Code		
office or	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change v	vas authorized	i by i	the corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changi cointment	ng its registered as registered		

SIGNATURE 5	ignature, typed or printed name of registered agent and title	if applicable. (NOTE:	Registered Agent signature require	ed when reinstating) DATE		
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	President	☐ DELETE	1.1 TITLE	Change	☐ Addition	
NAME	Stephen Rosenberg 152 W. 57th St New York, NY 10019		1.2 NAME			
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP			14 CITY-ST-ZIP			
TITLE	Vice-President Julie J. Delimba 98 Alexandria Pike	☐ DELETE	2.1 TITLE	☐ Change	☐ Addition	
NAME			22 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP	Warrenton, VA 20186		2.4 CITY-ST-ZIP			
TITLE	Vice-President	☐ DELETE	31 TITLE	☐ Change	☐ Addition	
NAME	Carole J. Jurney 98 Alexandria Pike Warrenton, VA 20186		3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	wallencon, va 20100		3.4. CITY-ST-ZIP			
TITLE	Secretary	☐ DELETE	4.1 TITLE	☐ Change	☐ Addition	
NAME.	Deborah S. Cook 98 Alexandria Pike Warrenton, VA 20186		4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	· ———	□ DELETE	51 TITLE	☐ Change	☐ Addition	
NAME			: 5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	61 TITLE	☐ Change	☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

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 suppliemental 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 acciver 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 chapted or on an attachment with an address, with all other like empowered.

SIGNATURE:

signa ure and types or printed Julie J. Delimba

540-341-2100

Daytime Phone #

=:=