

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

PROFIT
CORPORATION
ANNUAL REPORT~~1999~~ 2000FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS**FILED**
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90146 033 ***158.75

DOCUMENT # P97000091521Corporation Name
GUMP, INC.Principal Place of Business
**9700 NINTH STREET NORTH
SUITE 400
ST PETERSBURG FL 33702**Mailing Address
**9700 NINTH STREET NORTH
SUITE 400
ST PETERSBURG FL 33702**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/24/1997	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number APPLIED FOR 59-3487587	
22. City & State		27. City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ROWE, JAMES C ESQ
100 2ND AVE SOUTH
SUITE 400N
ST PETERSBURG FL 33701**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	12. NAME
<input type="checkbox"/> DELETE	P MARKEL, GARY L 9700 9TH ST. N., #400 ST. PETERSBURG FL 33702	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	V HEDGES, BURKE 2857 EXECUTIVE DR, #110 CLEARWATER FL 33762	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	2857 EXECUTIVE DR, #110
<input type="checkbox"/> DELETE	TS NORTH, ANGELA F 5300 W CYPRESS ST, #282 TAMPA FL 33607	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/00

727-540-9100