

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90033 035 ***550.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P97000095842**

Corporation Name
G.F. FORD, INC.



Principal Place of Business
**175 CHARTER CLUB CIRCLE
 SUITE 3
 FORT MYERS FL 33919**

Mailing Address
**8475 CHARTER CLUB CIRCLE
 SUITE 3
 FORT MYERS FL 33919**

DO NOT WRITE IN THIS SPACE

| | | | |
|---|----|---|----|
| Principal Place of Business 15278 CRICKET LN Suite, Apt. #, etc. | 26 | Mailing Address 15278 CRICKET LN Suite, Apt. #, etc. | 27 |
| City & State FT. MYERS FL | 28 | City & State FT. MYERS FL | 29 |
| Zip 33919 | 25 | Country LEE | 30 |

3. Date Incorporated or Qualified
11/10/1997

4. FEI Number
65-0794541

5. Certificate of Status Desired **\$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. Yes No

9. Name and Address of Current Registered Agent
**AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name
EDWARD DALLAS

82 Street Address (P.O. Box Number is Not Acceptable)
17274 SAN CARLOS BLVD STE 202

83

84 City
FT MYERS BEACH **FL** 85 Zip Code
33931

I, 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.

GNATURE *Edward Dallas* **6-30-99**
 Signature, Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|------------------------|--|---|---|
| LE | DP FORD, GERALD F 8475 CHARTER CLUB CIRCLE, SUITE 3 FORT MYERS FL 33919 | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 1.2 NAME | |
| REET ADDRESS | | 1.3 STREET ADDRESS | |
| Y-ST-ZIP | | 1.4 CITY-ST-ZIP | |
| LE | STD FORD, PATTI L 8475 CHARTER CLUB CIRCLE, SUITE 3 FORT MYERS FL 33919 | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 2.2 NAME | |
| REET ADDRESS | | 2.3 STREET ADDRESS | |
| Y-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| LE | | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 3.2 NAME | |
| REET ADDRESS | | 3.3 STREET ADDRESS | |
| Y-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| LE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 4.2 NAME | |
| REET ADDRESS | | 4.3 STREET ADDRESS | |
| Y-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| LE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 5.2 NAME | |
| REET ADDRESS | | 5.3 STREET ADDRESS | |
| Y-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| LE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| VE | | 6.2 NAME | |
| REET ADDRESS | | 6.3 STREET ADDRESS | |
| Y-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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.

GNATURE: *Gerald F. Ford* **GERALD F. FORD PRES.** **6/30/99** **941-454-0668**
 Signature, Typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (5/99)