

PROFIT CORPORATION ANNUAL REPORT 2000



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

FILED

00 MAY -1 PM 1:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000098560

1. Corporation Name
GET A GRIP, INC.

Principal Place of Business: 125 WEST AMELIA STREET, ORLANDO FL 32805, US
Mailing Address: 2125 WEST AMELIA STREET, ORLANDO FL 32805, US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business, 2a. Mailing Address, 26, 27, 28, 29, 30, 25, Country

3. Date Incorporated or Qualified: 11/17/1997
4. FEI Number: 59-3484148, APPLIED FOR
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 Tax: No

9. Name and Address of Current Registered Agent
FANN, MARTIN D
2125 WEST AMELIA STREET
ORLANDO FL 32805

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: 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

12. OFFICERS AND DIRECTORS	
TITLE: P	NAME: FANN, MARGARET L STREET ADDRESS: 2125 WEST AMELIA STREET CITY-ST-ZIP: ORLANDO FL 32805
TITLE: VP	NAME: FANN, THOMAS D STREET ADDRESS: 2125 WEST AMELIA STREET CITY-ST-ZIP: ORLANDO FL 32805
TITLE: ST	NAME: FANN, MARTIN D STREET ADDRESS: 2125 WEST AMELIA STREET CITY-ST-ZIP: ORLANDO FL 32805
TITLE: [] DELETE	
TITLE: [] DELETE	
TITLE: [] DELETE	
TITLE: [] DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: P	1.2 NAME: FANN, MARTIN D. 1.3 STREET ADDRESS: 2125 WEST AMELIA STREET 1.4 CITY-ST-ZIP: ORLANDO FL 32805
2.1 TITLE: VP	2.2 NAME: FANN, MARGARET L 2.3 STREET ADDRESS: 2125 WEST AMELIA STREET 2.4 CITY-ST-ZIP: ORLANDO FL 32805
3.1 TITLE: [] Change [] Addition	3.2 NAME: 600003248906--8 3.3 STREET ADDRESS: -05/11/00--01088--024 3.4 CITY-ST-ZIP: ****150.00 ****150.00
4.1 TITLE: [] Change [] Addition	4.2 NAME: [] Change [] Addition
5.1 TITLE: [] Change [] Addition	5.2 NAME: [] Change [] Addition
6.1 TITLE: [] Change [] Addition	6.2 NAME: [] Change [] Addition
6.3 STREET ADDRESS: [] Change [] Addition	6.4 CITY-ST-ZIP: [] Change [] Addition

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: Martin D. Fann, Pres. 4/29/00 (4107) 422-6954
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #