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FILED
Apr 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000101508 (4)**

1. Corporation Name

NORTH TRAIL STORE, INC.

Principal Place of Business

**521 NORTHWEST 13TH STREET
GAINESVILLE FL 32601**

Mailing Address

**521 NORTHWEST 13TH STREET
GAINESVILLE FL 32601**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1997

4. FEI Number

65-0796525

Applied For

☐ Not Applicable

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 8421 N. TAMiami TRAIL

2a. Mailing Address

Suite, Apt. #, etc.

City & State

22 SARASOTA FL

Zip

Country

24 34243

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent

81 Name

MICHAEL D. GORE

82 Street Address (P.O. Box Number is Not Acceptable)

521 N.W. 13TH STREET

83

84 City

GAINESVILLE

FL

85 Zip Code

32601

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

Michael D. Gore

MICHAEL D. GORE VICE PRESIDENT OF OPERATIONS 3/25/1998

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 **D** ☐ DELETE

NAME **GORE, ARTHUR J**
STREET ADDRESS **4305 NORTHWEST 75TH STREET**
CITY-ST-ZIP **GAINESVILLE FL 32606**

TITLE **D** ☐ DELETE

NAME **SHUKOVSKY, DAVID J**
STREET ADDRESS **7604 ALISTER MACKENZIE DRIVE**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE **D** ☐ DELETE

NAME **SHUKOVSKY, LAURA**
STREET ADDRESS **7604 ALISTER MACKENZIE DRIVE**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **C - Chairman**
1.3 STREET ADDRESS **S - Secretary**
1.4 CITY-ST-ZIP **also Director**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME **MICHAEL D. GORE**
4.3 STREET ADDRESS **521 N.W. 13TH STREET**
4.4 CITY-ST-ZIP **GAINESVILLE, FL 32601**

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME **PRESIDENT**
5.3 STREET ADDRESS **RICHARD LEWIS**
5.4 CITY-ST-ZIP **521 N.W. 13TH STREET**
GAINESVILLE, FL 32601

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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 registered 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, and an attachment with an address.

SIGNATURE:

Michael D. Gore

MICHAEL D. GORE VICE PRESIDENT OF OPERATIONS 3/25/1998

CR2E034 (10/97)