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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT #

P97000104443 (1)

**FILED** Mar 31 1998 8:00am Secretary of State

GASLIC	GHT INVESTMENTS, INC.	. ,				
Principal Place	e of Business	Mailing Address				
l '	EE AVENUE WEST	2401 MANATEE AVENUE WEST BRADENTON FL 34205			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified
						12/11/1997
2. Principal P	lace of Business	2a. Mailing Address	<del></del>			4. FEI Number Applied For
21		26				Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27			6. Certificate of Status Desired Fee Required	
City & State	в	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	—	ıntry		8. This corporation owes or has paid the current year Intangible
24	25	29	30	т		Personal Property Tax due June 30. Yes No 110, Name and Address of New Registered Agent
	9, Name and Address of Currer	и недівтегео жрепт		81	Name	10. Name and Address of New Registered Agent
	NLEY, ROGER P			<u> </u>	142/110	
	11 MANATEE AVENUE WEST			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
BA	ADENTON FL 34205			83		······································
				84	City	FL 85 Zip Code
11 Pureuent	to the provisions of Sections 607 050	2 and 607 1508. Florida Statu	es the a	hove.	-named co	
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corpor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
	m raminar with, and accept the obligi	ations of, Section 607.0505, Fi	orida Stat	iutes.		
SIGNATURE	Signature, typed or printed name of registered age	ant and little if applicable. (NOT	E: Aegistere	d Agen	it signature req	quired when reinslating) DATÉ
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET <b>e</b>	1.1 10	TLE		Change Addition
NAME	<b>R</b> EYNOLDS, HAL		1.2 N	AME	}	·
STREET ADDRESS	4217 SCATTERFIELD ROAD		1.3 ST	TREET A	ADDRESS	
CITY-ST-ZIP	ANDERSON IN 46013		1.4 C	ITY-ST	- ZIP	
TETLE		☐ DELET <b>E</b>	2 1 TI	TLE		Change Addition
NAME			2.2 N/	AME		
STREET ADDRESS			2.3 \$3	REET A	ADDRESS	\$10 Not
CITY-ST-ZIP	,			ITY-ST	r-ZIP	
TITLE		☐ DELET <b>E</b>	3.1 TI			☐ Change ☐ Addition
NAME			3.2 N/		İ	į
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	_	ITY-ST	- ZIP	
TITLE		L_) DELETE	4.1 TO			Change Addition
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	
CiTY-ST-ZIP TITLE		DELETE	4.4 CI 5.1 TI	TY-ST-	- ZIP	☐ Change ☐ Addition
		□ preceie				Change C Addition
NAME CTREET ADDRESS			5.2 NA		annerec	
STREET ADDRESS					£DDR€SS	<u> </u>
CITY-ST-ZIP TITLE		DELETE	5.4 Ci 6.1 Til	TY-ST-	- 217	Change Addition
ľ		vereit				Change Change
NAME OTRECT ADDRESS			6.2 N/		DODGEC	
STREET ADDRESS					DORESS	
CITY-ST-ZIP			6.4 CI	TY-ST-	- 217	

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 of this test of the corporation or the receiver of the same appears in Block 12 or Block 13 or changed, or on an attachment with an address.