

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90233 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000091032					
1. Corporation Name GREGORY CONSULTING GROUP, INC.					



Principal Place of Business		Mailing Address	
1615 Parkside Circle South Boca Raton, Florida 33486		SAME	

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/26/1998	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 65-0874818	
22. City & State		27. City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No	
3. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
AMERL CORPORATE SERVICES, INC. 1615 Parkside Circle South Boca Raton, Florida 33486				Dale Gregory 1615 Parkside Circle South Boca Raton, Florida 33486 FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.1503, Florida Statutes.

SIGNATURE: *Dale Gregory* DATE: 3/7/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
☐ DELETE		☐ Change ☐ Addition	
1. TITLE D NAME GREGORY, DALE M STREET ADDRESS 1615 Parkside Circle South CITY-ST-ZIP Boca Raton, Florida 33486		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
2. TITLE NAME STREET ADDRESS CITY-ST-ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
3. TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
4. TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
5. TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
☐ DELETE		☐ Change ☐ Addition	
6. TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 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 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 persons empowered.

SIGNATURE: *Dale Gregory* DATE: 4/14/99