**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90118 003 \*\*\*150.00

G C VE	NTURES, INC						
rincipal Plac	ce of Business	Mailing Address					···· <del>····</del>
413 W ALVA		4413 W ALVA STREET			•		
AMPA FL 338	614	TAMPA FL 33614			DO NOT WRITE IN TH	IS SFACE	
					3. Date Incorporated or Qualified		
					11/04/1998		
2. Principal	Place of Business	*2a. Mailing Address			4. FEI Number	Ap	plied For
]	•	26			39-3541492		t Applicable
Suite, Apt	ı. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
1		27				Fee Re	<del></del>
City & Sta	ate	City & State			6. Election Campaign Financing	\$5.00	
		28			Trust Fund Contribution	Added	W 1888
Z⊅p	Country	Zlp	Count	ry	This corporation owes the current year in Personal Property Tax.	ntançıible []Yes	□No
· <u>l</u>	25	29	30		10. Name and Address of New Registere		
	9. Name and Address of Curre	ur vefittnan vflatt	1	31 Name	100 10000 0000 0000 0000 0000 0000 0000		
GE	orge, steven d		L				
	13 W ALVA STREET		8	Street Add	ress (P.O. Box Number Is Not Acceptable)		
	MPA FL 33614		1	33			
.,			Ĺ			71	5.4.
			[8	4 City		85 Zip (	Code
1. Pursuan office or agent. I	at to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the blig	i02 and 607.1508, Florida Statut e of Florida. Such change was a lations of, Section 807.0505, Flo	es, the about othorized tride Statut	ove-named cor by the corporat es.	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as re	registered gisterec
SIGNATURE	Signature, typed printed name of registered a	pent and little if applicable. (NOTE	Registered A		od when reinstating) OATE	777	
SIGNATURE	Signature, typed printed turns of registered at OFFICERS A	ent and little if applicable. (NOTE ND DIRECTORS	Registered A	gent signature requir	3/2 \$	ND DIRECTO	
SIGNATURE  2. TLE	Signature, typed private turns of regulared as OFFICERS A William R. Shire	pent and little if applicable. (NOTE	Registered A	gent signature requir	od when reinstating) OATE	777	RS IN 12
SIGNATURE  2. TLE	Signature, types printed name of regulated as OFFICERS A William R. Shire Vice President	ent and little if applicable. (NOTE ND DIRECTORS	13, 1.1 TITLE	gent signature requir	od when reinstating) OATE	ND DIRECTO	RS IN 12
SIGNATURE  2. TLE  MAGE  TREET ADDRESS	Signature. Appear printed name of regulated as OFFICERS A William R. Shure Vice President	ent and little if applicable. (NOTE ND DIRECTORS	13. 1.1 TITL 1.2 NAM 1.3 STR	gent signature requir E E EET ADDRESS	od when reinstating) OATE	ND DIRECTO	RS IN 12
SIGNATURE  2. TLE  AME  TREET ADDRESS  TTY-S1-ZIP	Signature, post printed name of required a OFFICERS A William R. Shire Vice President	nert and Use if applicable. (NO) E ND DIRECTORS  DELETE	13. 1.1 TITL 1.2 NAM 1.3 STR	gent signature require E E E E E E E T T T T T T T T T T T T	od when reinstating) OATE	ND DIRECTO	PRS IN 12
SIGNATURE  2. TLE AME TREET ADDRESS TY-\$1-ZIP TTLE	Signature, young printed native of regulated in OFFICERS A William R. Shire Vice President same.	ent and little if applicable. (NOTE ND DIRECTORS	13, 1.1 TITL 12 NAM 13 STRI 1.4 CITY	gent signature require E E E E E E E E T T T T T T T T T T T	od when reinstating) OATE	AND DIRECTO	PRS IN 12
2. TLE MAGE TREET ADDRESS TTY-S1-ZIP TTLE AME	Signature. Types printed as the of regulated as OFFICERS A William R. Shire Vice President some Closeph & Oliver Vice President	nert and Use if applicable. (NO) E ND DIRECTORS  DELETE	13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 2.1 TITL 22 NAM	gent signature require E E E E E E E E T T T T T T T T T T T	od when reinstating) OATE	AND DIRECTO	PRS IN 12
2. TLE AME TREET ADDRESS TREET ADDRESS TREET ADDRESS	Signature, young prised name of regulated in OFFICERS A William R. Shire Vice President s same.  Loseph & Oliver Vice President	nert and Use if applicable. (NO) E ND DIRECTORS  DELETE	13, 1.1 TITL 12 NAM 13 STRI 1.4 CITY 2.1 TITL 22 NAM 2.3 STRI	gent signature requir	od when reinstating) OATE	ND DIRECTO []Change	RS IN 12 Addition
SIGNATURE  2. TLE TREET ADDRESS TITY-ST-ZIP TITLE AME TREET ADDRESS TITY-ST-ZIP	Signature. Types printed as the of regulated as OFFICERS A William R. Shire Vice President some Closeph & Oliver Vice President	nert and Use if applicable. (NO) E ND DIRECTORS  DELETE	13, 1.1 TITL 12 NAM 13 STRI 1.4 CITY 2.1 TITL 22 NAM 2.3 STRI	Gent eignature requisit  E  E  E  EET ADDRESS  .ST.ZIP  E  E  E-T ADDRESS  .ST.ZIP	od when reinstating) OATE	AND DIRECTO	RS IN 12 Addition
SIGNATURE  2. TLE  AME  TREET ADDRESS  TIY-S1-ZP  TILE  AME  TREET ADDRESS  TIY-S'-ZP  TITE  TREET ADDRESS	Signature. Types printed as the of regulated as OFFICERS A William R. Shire Vice President some Closeph & Oliver Vice President	not and We If applicable. (NO) E  ND DIRECTORS  DELETE	13, 1.1 TITL 12 NAM 13 STRI 1.4 CITY 2.1 TITL 22 NAM 2.3 STRI 2.4 CITY	Gert eignature require  E  E  E  E  E  E  T  T  T  T  T  T  T	od when reinstating) OATE	ND DIRECTO []Change	RS IN 12 Addition
SIGNATURE  2. THE AME TREET ADDRESS ITY-S1-ZIP THE AME TREET ADDRESS ITY-S'-ZIP THE AME	Styrature, typosof printed name of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	not and We If applicable. (NO) E  ND DIRECTORS  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 22 NAM 23 STR 2.4 CIT 3.1 TITLL 32 NAM	Gert eignature require  E  E  E  E  E  E  T  T  T  T  T  T  T	od when reinstating) OATE	ND DIRECTO []Change	Addition
SIGNATURE  2. THE  MAGE  FREET ADDRESS  THE  AME  FREET ADDRESS  THY-S'-ZIP  THE  AME  THE  THE  THE  THE  THE  THE  THE  T	Styrature, typosof printed name of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	not and We If applicable. (NO) E  ND DIRECTORS  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 22 NAM 23 STR 2.4 CIT 3.1 TITLL 32 NAM 3.3 STR	Gert eignature requirements E E E E E E E E T T T T T T T T T T T	od when reinstating) OATE	ND DIRECTO [] Change [] Change	Addition
SIGNATURE  2. THE  MADE  TREET ADDRESS  TITY-ST-ZIP  THE  TREET ADDRESS  TITY-ST-ZIP  THE  AME  TREET ADDRESS  TOTALS  TOTALS	Styrature, typosof printed name of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	not and We If applicable. (NO) E  ND DIRECTORS  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 22 NAM 23 STR 2.4 CIT 3.1 TITLL 32 NAM 3.3 STR	Gert algrature requirements  E E E E E E E E E T T T T T T T T T T	od when reinstating) OATE	ND DIRECTO []Change	Addition
SIGNATURE  2. THE  AME  THE TADORESS  THE  THE  THE  THE  THE  THE  THE	Styrature, typosof printed name of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and title if applicable. (NO) E  ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 22 NAM 2.3 STR 2.4 CIT 3.1 TITLL 32 NAM 33 STR 3.4 CITY 3.4 CITY 3.5 CITY 3.5 CITY 3.5 CITY 3.7 CITY	Gert eigneture requir	od when reinstating) OATE	ND DIRECTO [] Change [] Change	Addition
SIGNATURE  2. TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME TREET ADDRESS TITY-ST-ZIP TILE AME	Signature. Types printed to the of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and title if applicable. (NO) E  ND DIRECTORS  DELETE  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 22 NAM 23 STR 2.4 CIT 3.1 TITLL 32 NAM 33 STR 34. CITY 4.1 TITLL 4.2 NAM	Gert eigneture requir	od when reinstating) OATE	ND DIRECTO [] Change [] Change	Addition
2. TILE AME TREET ADDRESS ITY-S'-ZIP TILE AME TREET ADDRESS ITY-S'-ZIP TILE AME TREET ADDRESS ITY-S'-ZIP TILE AME TREET ADDRESS	Signature. Types printed to the of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and We If applicable. (NO) E  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITLL 3.2 NAM 3.3 STR 3.4 CITY 4.2 NAM 4.3 STR 4.3 STR 4.3 STR 4.3 STR 4.3 STR	Gert algrature requirements  E E E E E E E E E E F T T T T T T T T	od when reinstating) OATE	TAND DIRECTO [] Change [] Change [] Change	Addition  Addition
SIGNATURE  2. THE  AME  TREET ADDRESS  TIY-ST-ZIP  THE  TREET ADDRESS	Signature. Types printed to the of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and title if applicable. (NO) E  ND DIRECTORS  DELETE  DELETE	13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.4 CITY 4.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL	E E E E E E E E E E E T T T T T T T T T	od when reinstating) OATE	ND DIRECTO [] Change [] Change	Addition  Addition
SIGNATURE	Signature. Types printed to the of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and We If applicable. (NO) E  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLL 12 NAM 13 STRI 2.1 TITLL 22 NAM 2.3 STRI 3.4 CITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITLL 5.2 NAM 5.3 STRI 4.4 CITY 5.2 NAM 5.3 STRI 5.4 CITL 5.2 NAM 5.3 STRI 5.4 CITY 5.3 NAM 5.3 STRI 5.4 NAM 5.3 STRI 5.3 NAM 5.3	E E E E E E E E E E T T T T T T T T T T	od when reinstating) OATE	TAND DIRECTO [] Change [] Change [] Change	Addition
SIGNATURE  2. TLE MAKE TREET ADDRESS TITY-ST-ZIP TILE AME TITY-ST-ZIP TILE TITE TITE TITE TITE TITE TITE TITE	Signature. pped printed rathe of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and We If applicable. (NO) E  ND DIRECTORS  DELETE  DELETE  DELETE	1.1 TITLL 12 NAM 13 STR 1.4 CITY 2.1 TITLL 2.2 NAM 2.3 STR 2.4 CITY 3.1 TITLL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITLL 5.2 NAM 5.3 STR 5.3 S	E E E E E E E E E E E E T T T T T T T T	od when reinstating) OATE	TAND DIRECTO [] Change [] Change [] Change	Addition
2.  TILE  AME  TREET ADDRESS  TITLE  AME  TREET ADDRESS  TITLS  TITLE  AME  TITLE  AME  TITLE	Signature. pped printed rathe of regulated as OFFICERS A William R. Shire Vice President s same Loseph & Oliver Vice President s same	port and We If applicable. (NO) E  ND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLL 12 NAM 13 STRI 2.1 TITLL 22 NAM 2.3 STRI 3.4 CITL 4.2 NAM 4.3 STRI 4.4 CITY 5.1 TITLL 5.2 NAM 5.3 STRI 4.4 CITY 5.2 NAM 5.3 STRI 5.4 CITL 5.2 NAM 5.3 STRI 5.4 CITY 5.3 NAM 5.3 STRI 5.4 NAM 5.3 STRI 5.3 NAM 5.3	E E E E E E E E E E E E E T A O T E E T A O T E E T A O T E E E E E E E E E E E E E E E E E E	od when reinstating) OATE	TAND DIRECTO [] Change [] Change [] Change	RS IN 12

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 path; 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. CITY-ST-ZIP

8.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SI	G	N	Δ	Tí	iR	F

STREET ADDRESS

SIGNATURE	requ	REC
		D-100