FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S16579** **(2)**

1. Corporation Name

GRAY - KANTOR & ASSOCIATES, INC.

Principal Place of Business

2290 10TH AVE NO
404
LAKE WORTH FL 33461
US

Mailing Address

2290 10TH AVE NO
404
LAKE WORTH FL 33461
US

2. Principal Place of Business

21 6351 LAKE WORTH RD.
Suite, Apt. #, etc.
22
City & State
23 LAKE WORTH
Zip 24 FL
Country 25 USA

2a. Mailing Address

26 6351 LAKE WORTH Rd.
Suite, Apt. #, etc.
27
City & State
28 LAKE WORTH
Zip 29 FL
Country 30 USA

3. Date Incorporated or Qualified: 12/03/1990

3a. Date of Last Report: 05/01/1995

4. FEI Number: 65-0230512 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BASS, DONALD L.
7166 S.E. OSFREY STREET
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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 the date signed — (NOTE: Registered Agent is not required for this change) — DATE

12. OFFICERS AND DIRECTORS

TITLE	D ☐ DELETE
NAME	GRAY, SUSAN M.
STREET ADDRESS	2290 10TH AVENUE NORTH
CITY-ST-ZIP	LAKE WORTH FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☑ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	6351 LAKE WORTH ROAD
1.4 CITY-ST-ZIP	LAKE WORTH, FL 33463-3409
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	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/96
Date

4076410205
Document Number #

CR2E034 (12/95)