

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 # **S18477** (7)

1. Corporation Name
GPW ENTERPRISES, INC.



Principal Place of Business

**3878 PROSPECT AVE.
SUITE 23
RIVIERA BEACH FL 33404
US**

Mailing Address

**P.O. BOX 31812
PALM BEACH GARDENS FL 33420
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip 30 Country

9. Name and Address of Current Registered Agent

**GEIST, ANDREW TODD
3878 PROSPECT AVE.
SUITE 23
RIVIERA BEACH FL 33404**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
12/10/1990

3a. Date of Last Report
09/11/1995

4. FEI Number
65-0239024

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

10. Name and Address of New Registered Agent

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 of corporation or officer, agent, director, or shareholder

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	WITTERS, JON M.	
STREET ADDRESS	207 LINDA LN.	
CITY-STATE-ZIP	PALM BEACH SHORES FL	
TITLE	V	☐ DELETE
NAME	GEIST, ANDREW TODD	
STREET ADDRESS	26 MARLWOOD LANE	
CITY-STATE-ZIP	PALM BEACH GARDENS FL 33418	
TITLE	V	☐ DELETE
NAME	BONSON, BILL	
STREET ADDRESS	6127 SEVEN SPRINGS BLVD.	
CITY-STATE-ZIP	LAKE WORTH FL 33463	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-STATE-ZIP	
2. TITLE	☒ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	200 Alameda Way H102
24. CITY-STATE-ZIP	Palm Beach Gardens, FL 33410
3. TITLE	☐ Change ☐ Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-STATE-ZIP	
4. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY-STATE-ZIP	
5. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY-STATE-ZIP	
6. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. CITY-STATE-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:

Andrew Todd Geist
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-91

407-881-1900

Daytime Phone #

CR2E034 (12/95)