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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S21975

(5)

GULLEY'S SURPLUS, INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address				1 186(1110 110 11041 11810 10111 1880	BIII OFFII DIR	i dirii cirii dia	FF DIOM NOT
7444 PALM RIVER ROAD TAMPA FL 33619			7444 PALM RIVER ROAD							
US		US	TAMPA FL 33619 US				DO NOT WRITE IN THIS SPACE			
							 Date Incorporated or Qualifie 12/26/1990 	d		
	lace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number		A	pplied For
21		26				59-3043729 Not Applicab				
Suite, Apt. #, etc.		Suite, Apt #, etc.	Surte, Apt #, etc.				5. Certificate of Status Desired	×		Additional equired
City & State)	City & State	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution		DebbA	to Fees
Zip 24	Country	Zip		untry			8. This corporation owes or has	•		
24	25 Same and Address of Curr	ent Registered Agent	30	т—		L	Personal Property Tax due Ju 10. Name and Address of New] No
		our neglisteren Agent		81	Na	ame	10, Name and Address of New	negistered	Man	
SOOST, CHARLES R.				Ш						
731 S. DILLARD ST. WINTER GARDEN FL 34782				82 Street Address (P.O. Box			(P.O. Box Number is Not Accep	table)		
PATE	HEN GANDEN FL 34702			83						
				84	City	ly		FL	85 Zip	Code
11. Pursuant i office or re agent i a	to the provisions of Sections 607.05 egistered agent, or both, in the Stamfamiliar with, and accept the obli	502 and 607,1508, Florida State of Florida, Such change waigations of, Section 607,0505,	tutes, the a is authorize Florida Sta	bove d by tutes	nan the	med corpora corporation	ation submits this statement for the sound of directors. I hereby according to the sound of directors and the sound of directors and the sound of directors are sound of the s	purpose opent the app	of changing in pointment as	ts registered registered
SIGNATURE										
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	13.	id Age	nt sign	nature required w	ADDITIONS/CHANGES TO OF	DATE	D DIRECTOR	90 IN 12
TOTLE	P	DELETE					ADDITIONS/CHANGES TO OF	ICENS AN	Change	Addition
NAME	SOOST, CHARLES R.		1.2 N							
STREET ADDRESS	731 S. DILLARD ST.		13 STR			ESS				
CITY-SY-ZIP	WINTER GAREND FL		14 CITY							
TITLE	VP DELETE 211								☐ Change	Addition
NAME	HOWARD, JUDITH K.		2 2 NA		2 2 NAME					
STREET ADDRESS	11005 FRESNO LANE		2.3 S			ESS				
CITY - ST - ZIP	RIVERMEW FL		2.40	2. 4 CITY-ST-ZIP						
TITLE		☐ DELETE	DELETE 3.1 T		3.1 TIFLE				Change	Addition
NAME			3.2 NA		J.2 NAME					
STREET ADDRESS			3.3 S1	TREET	ADDRE	ESS				
CITY-ST-ZIP			3.4. C	ITY-S	T-ZIP					
TITLE		DELETE	4.1 Ti	TLE					Change	Addition
NAME ^			4. 2 N	IAME						
STREET ADDRESS			4.3 ST	TREET	ADDRE	ESS				
CITY-SI-ZIP				TY-ST	- ZIP					
TITLE		DELETE	5 1 TI						Change	Addition
NAME			52 N/							
STREET ADDRESS			1	TREET A		ESS				
CITY-ST-ZIP TITLE		DELETE		TY-ST	- ZIP	_			Change	Addition
		☐ VELETE	61 TI						∟ Uange	L.J ADDITION
NAME CYDEST ADODESC			62 N/							
STREET ADDRESS			/	TREET A		ESS				
14. I hereby c	ertify that the information supplied	with this filing does not qualify		TY-ST		stated in Se	/ tion 119.07(3)(i) Florida Statutes	Lfurther or	ertify that the	information

indicated on this annual report or supplier with his filling does be thanking to the example of state 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.

CIONIATURE.

CR2E034 (1)

4/10/08 (813) 626-7889