

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

REGISTRATION
 1995



FLORIDA DEPARTMENT OF STATE
 Secretary of State

DOCUMENT #

547297

Godleski Associates Inc.

PLEASE NOTE
 NO FORM
 6000

APPROVED
 AND
 FILED
 IN THE
 OFFICE OF THE
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

32 OR Godleski Associates Inc.
 5638 Bayside Dr
 Orlando, Florida 32819

5638 Bayside Dr.
 Orlando, Florida 32819

2	2a	3	3a
21	26	01/01/1992	05/01/1994
22	27	59-3060719	
23	28		\$8.75 Additional Fee Required
24	29		\$5.00 May Be Added to Fees
	30		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9	10
Godleski, Peter J. 5638 Bayside Drive Orlando, Florida 32819	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City

11. I, the undersigned, the president of Section 1917.05(1) and 1917.1508, Florida Statutes, the above named corporation submits this statement for the purpose of filing for registration in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and assume all the obligations of Section 607.0509, Florida Statutes.

12. OFFICERS AND DIRECTORS

12	13
Godleski, Peter J. 5638 Bayside Drive Orlando, FL 32819	14 TITLE 15 NAME 16 STREET ADDRESS 17 CITY, ST, ZIP
	18 TITLE 19 NAME 20 STREET ADDRESS 21 CITY, ST, ZIP
	22 TITLE 23 NAME 24 STREET ADDRESS 25 CITY, ST, ZIP
	26 TITLE 27 NAME 28 STREET ADDRESS 29 CITY, ST, ZIP
	30 TITLE 31 NAME 32 STREET ADDRESS 33 CITY, ST, ZIP
	34 TITLE 35 NAME 36 STREET ADDRESS 37 CITY, ST, ZIP
	38 TITLE 39 NAME 40 STREET ADDRESS 41 CITY, ST, ZIP
	42 TITLE 43 NAME 44 STREET ADDRESS 45 CITY, ST, ZIP
	46 TITLE 47 NAME 48 STREET ADDRESS 49 CITY, ST, ZIP
	50 TITLE 51 NAME 52 STREET ADDRESS 53 CITY, ST, ZIP
	54 TITLE 55 NAME 56 STREET ADDRESS 57 CITY, ST, ZIP
	58 TITLE 59 NAME 60 STREET ADDRESS 61 CITY, ST, ZIP
	62 TITLE 63 NAME 64 STREET ADDRESS 65 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1917.05(1) Florida Statutes. I further certify that the information is true and correct and that my signature shall have the same legal effect as if signed by me in person. I am not a director or officer of the corporation and do not have the authority to sign this report as required by Chapter 607, Florida Statutes, and that my signature is not a violation of any law or regulation.

SIGNATURE: *Godleski*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-94 407 2170177