

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # S64311 (1)

1. Corporation Name

FRED H. GELSTON, P.A.

95 MAR 14 AM 8:21

Principal Place of Business

Mailing Address

SUITE B  
601 N. DIXIE HWY  
W PALM BEACH FL 33401

SUITE B  
601 N. DIXIE HWY  
W PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/21/1991

3a. Date of Last Report

09/27/1994

4. FEI Number

65-0352545

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

7. This corporation has liability for intangible tax under S. 109.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

24. Country

28. Zip

29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GELSTON, FRED H.  
SUITE B  
601 N. DIXIE HWY  
W PALM BEACH FL 33401

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

(Signature typed or printed name of registered agent and fee if applicable)

(Signature typed or printed name of registered agent and fee if applicable)

(Date)

12. OFFICERS AND DIRECTORS

| TITLE | NAME             | STREET ADDRESS    | CITY-ST-ZIP     |
|-------|------------------|-------------------|-----------------|
| D     | GELSTON, FRED H. | 6911 S FLAGLER DR | W PALM BEACH FL |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |
|       |                  |                   |                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1. TITLE | 2. NAME | 3. STREET ADDRESS | 4. CITY-ST-ZIP | Change                   | Addition                 |
|----------|---------|-------------------|----------------|--------------------------|--------------------------|
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
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|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |
|          |         |                   |                | <input type="checkbox"/> | <input type="checkbox"/> |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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. If I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13, I have changed, or on an attachment with an address.

SIGNATURE:

Fred H. Gelston Fred H Gelston

2/28/95

(407)832-6155

(Signature typed or printed name of signing officer or director)

(Date)

(Telephone Number)