

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90095 044 \*\*\*150.00

DOCUMENT # S66971

1. Corporation Name  
GMK ASSOCIATES, INC.

Principal Place of Business

4300 US HWY #1 S.  
209  
JUPITER FL 33487  
US

Mailing Address

4300 US HWY 1 S.  
209  
JUPITER FL 33487  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1991

4. FEI Number

65-0275521

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 102 SAND PINE DRIVE

2a. Mailing Address

26 102 SAND PINE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 JUPITER, FL

City & State

28 JUPITER, FL

Zip

24 33477 25 USA

Zip

29 33477 30 USA

9. Name and Address of Current Registered Agent

KARL, GERHARD O.  
4300 US HWY #1 S  
STE 209  
JUPITER FL 33477

10. Name and Address of New Registered Agent

81 Name

GERHARD KARL

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

102 SAND PINE DRIVE

83

84 City

JUPITER

FL

85 Zip Code  
33477

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME KARL, GERHARD O.  
STREET ADDRESS 4300 US HWY #1 SOUTH, STE 209  
CITY-ST-ZIP JUPITER FL

TITLE D ☐ DELETE

NAME KARL, MARY ELLEN  
STREET ADDRESS 4300 US HWY #1 SOUTH, STE 209  
CITY-ST-ZIP JUPITER 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SEC/TRES ☒ Change ☐ Addition

1.2 NAME KARL, GERHARD  
1.3 STREET ADDRESS 102 SAND PINE DRIVE  
1.4 CITY-ST-ZIP JUPITER, FL 33477

2.1 TITLE PRES ☒ Change ☐ Addition

2.2 NAME KARL, MARY ELLEN  
2.3 STREET ADDRESS 102 SAND PINE DRIVE  
2.4 CITY-ST-ZIP JUPITER, FL 33477

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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

*Gerhard Karl*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-99

Date

561-626-6110

Daytime Phone #

CR2E034 (11/98)

0357781