FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V02168 (5)

1. Corporation Name
GREAT SOUTHERN TRADE AND CHARTER CO., INC.

Principal Place of Business	Mailing Address
2201 LAKESIDE DRIVE ORLANDO FL 32803	2201 LAKESIDE DRIVE ORLANDO FL 32803

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/20/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21: 720 Arjay Way
Suite, Apt. #, etc. 22:
City & State 23: Winter Park FL
Zip 24: 32789 County 25: Orange

2a. Mailing Address
26: 720 Arjay Way
Suite, Apt. #, etc. 27:
City & State 28: Winter Park FL
Zip 29: 32789 County 30: Orange

4. FEI Number: 59-3098951 ☐ 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

9. Name and Address of Current Registered Agent

FITZGIBBONS, THOMAS M.
1800 SECOND ST.
SUITE 775
SARASOTA FL 34236

10. Name and Address of New Registered Agent

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 607.1508, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE		☐ Change ☐ Addition
NAME	FEARS, JAMES	12 NAME		
STREET ADDRESS	120 ARJAY WAY	13 STREET ADDRESS		
CITY ST ZIP	WINTER PARK FL	14 CITY ST ZIP		
TITLE	~~DVP~~	21 TITLE	DST	☑ Change ☐ Addition
NAME	~~RONNICK, ARLENE B~~	22 NAME	Margaret Lynn Fears	
STREET ADDRESS	~~2201 LAKESIDE DR~~	23 STREET ADDRESS	720 Arjay Way	
CITY ST ZIP	~~ORLANDO FL~~	24 CITY ST ZIP	Winter Park FL 32789	
TITLE	~~DS~~	31 TITLE		☐ Change ☐ Addition
NAME	~~RONNICK, ARLENE B.~~	32 NAME		
STREET ADDRESS	~~2201 LAKESIDE DR~~	33 STREET ADDRESS		
CITY ST ZIP	~~ORLANDO FL~~	34 CITY ST ZIP		
TITLE	DT	41 TITLE	DVP	☑ Change ☐ Addition
NAME	RONNICK, RICHARD F.	42 NAME		
STREET ADDRESS	4271 BILTMORE DR	43 STREET ADDRESS		
CITY ST ZIP	ORLANDO FL	44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST 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)(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.

SIGNATURE: James Fears 4/28/95 (407) 647-3746
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0068285 CP