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 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V27517 (4)

1. Corporation Name
G.C.O.C. MANAGEMENT COMPANY, INC.

Principal Place of Business:
7315 HUDSON AVE.
HUDSON FL 34667

Mailing Address:
7315 HUDSON AVE.
HUDSON FL 34667

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/09/1992
3a. Date of Last Report: 02/25/1994
4. FEI Number: 59-3126363 [ ] 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 [X] Yes [ ] No

2. Principal Place of Business 21 ___ Suite, Apt. # etc. 22 ___ City & State 23 ___ Zip 24 ___ Country 25 ___
2a. Mailing Address 26 ___ Suite, Apt. # etc. 27 ___ City & State 28 ___ Zip 29 ___ Country 30 ___

9. Name and Address of Current Registered Agent
ZSCHAU, JULIUS J., ESQ.
28050 U.S. HIGHWAY 19 NORTH
SUITE 501
CLEARWATER FL 34621

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 911 Chestnut Street
83 Johnson, Blakely, Pope, Bokor, Ruppel & Burns
84 City: Clearwater FL 85 Zip Code: 34616

11. Pursuant to the provisions of sections 607.0502 and 617.0502, 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 the position.

Signature: [signature] 4-29-95

12. Officers and Directors		13. Additions/Changes to Officers and Directors	
Title	P	Title	[ ] Change [ ] Addition
Name	BONATI, DR. ALFRED O.	Name	
Street Address	7315 HUDSON AVE.	Street Address	
City-St-Zip	HUDSON FL	City-St-Zip	
Title	VP	Title	[ ] Change [ ] Addition
Name	BONATI, LEOPOLD	Name	
Street Address	7315 HUDSON AVE	Street Address	
City-St-Zip	HUDSON FL	City-St-Zip	
Title	ST	Title	[ ] Change [ ] Addition
Name	O'RYAN, CECILIA	Name	
Street Address	7315 HUDSON AVE.	Street Address	
City-St-Zip	HUDSON FL	City-St-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07, 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: [signature] Cecilia O"Ryan 4/26/95 813-868-9563

Signature and typed or printed name of signing officer or director / Date / Daytime Phone #

0384073 CP