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Secretary of State

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PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # V62932

1. Corporation Name
G. L. NOBLE & ASSOCIATES, INC.



Principal Place of Business
 5413 E BUSCH BLVD
 TEMPLE TERRACE FL 33617
 US

Mailing Address
 5509 EAST BUSCH BOULEVARD
 TEMPLE TERRACE FL 33617

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/10/1992

4. FEI Number
59-3144056 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 **5413 E. Busch Blvd**
 Suite, Apt. #, etc.

2a. Mailing Address
 26 **5413 E. Busch Blvd**
 Suite, Apt. #, etc.

22

23 **Temple Terrace, FL**
 City & State

28 **Temple Terrace, FL**
 City & State

24 **33617** 25 **US**
 Zip Country

29 **33617** 30 **US**
 Zip Country

9. Name and Address of Current Registered Agent
MORRISON, ROBERT B., JR.
800 W PLATT ST #2
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
8302 River Highlands PL

83

84 City **Tampa** FL 85 Zip Code **33617**

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

TITLE DELETE
PSD
 NAME **NOBLE, GWENDOLYN L.**
 STREET ADDRESS **5509 E BUSCH BLVD.**
 CITY-ST-ZIP **TEMPLE TERRACE FL**

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
Same

1.2 NAME

1.3 STREET ADDRESS **5413 E. Busch Blvd**

1.4 CITY-ST-ZIP **Temple Terrace, FL. 33617**

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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: **GWENDOLYN L. NOBLE** **4-27-99** **(813) 988-4577**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)