

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90178 034 ****61.25

DOCUMENT # 760680

1. Entity Name

THE GOLD SHIELD FOUNDATION, INC.

Principal Place of Business

Mailing Address

PO BOX 211791
 TAMPA FL 33688-1791

PO BOX 211791
 TAMPA FL 33688

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

PO BOX 271791

Suite, Apt. #, etc.

City & State

City & State
 TAMPA, FL

4. FEI Number

59-2236362

Applied For

Not Applicable

Zip

Country

Zip

Country

33688-1791

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VOSKERICHIAN, JOE P
 13920 CLUBHOUSE CIRCLE
 TAMPA FL 33624

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P Delete
 NAME BOWERS, RICHARD T
 STREET ADDRESS 4202 E FOWLER AVE
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME MCNIFF, PHILIP
 STREET ADDRESS 1 STEINBRENNER DR
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME VOSKERICHIAN, JOE
 STREET ADDRESS 13920 CLUBHOUSE DR
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME NEWBERGER, NEW
 STREET ADDRESS PO BOX 270603
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME DEGOOD, GERALD
 STREET ADDRESS 101 E KENNEDY BLVD #2200
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME ROBERT E MCCRANIE III
 STREET ADDRESS 450 PLEASANT GROVE RD.
 CITY-ST-ZIP INVERNESS, FL 34452

TITLE D Delete
 NAME WITTCOFF, RICHARD
 STREET ADDRESS 5700 MARINER ST APT 702E
 CITY-ST-ZIP TAMPA FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert E. McCranie III
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/00
 Date

Daytime Phone #

CR2E037 (9/99)