

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State
03-15-2001 90209 032 ***150.00

DOCUMENT # G26591

1. Entity Name
GREG HITT MARKETING, INC.

Principal Place of Business Mailing Address
~~999 S. TAMiami TRAIL~~ ~~333 S. TAMiami TRAIL~~
% GREGORY V. HITT, P.O. BOX 727 % GREGORY V. HITT, P.O. BOX 727
VENICE FL 34285 VENICE FL 34285

2. Principal Place of Business 3. Mailing Address
2414 Hermitage Blvd. **P.O. Box 727**
Suite, Apt. #, etc. Suite, Apt. #, etc.
Venice, FL. 34292
City & State City & State
Venice, FL

Zip Country Zip Country
34292 **Sarasota** **34284** **Sarasota**

6. Name and Address of Current Registered Agent

HITT, GREGORY V.
333 S. TAMiami TRAIL
VENICE FL 34285

7. Name and Address of New Registered Agent

Name **Hitt, Gregory V.**
Street Address (P.O. Box Number is Not Acceptable)
2414 Hermitage Blvd.
City **Venice** **FL** Zip Code **34292**

* 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 *Gregory V. Hitt* **Gregory V. Hitt, President** **3-13-01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	HITT, GREGORY V	333 S. TAMiami TRAIL	VENICE FL	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		2414 Hermitage Blvd.	Venice, FL	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gregory V. Hitt* **Gregory V. Hitt** **3-13-01** **941-484-6991**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)