

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000067916

1. Entity Name

GRAPHIC DESIGNS INTERNATIONAL, INC.

FILED
Jun 01, 2000 8:00 am
Secretary of State

06-01-2000 90002 011 ***150.00

Principal Place of Business

Mailing Address

3161-3 SE SLATER ST
STUART FL 34997
US

P.O. BOX 2431
STUART FL 34995-2431
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0517545

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLT, MARGARET
3161 SE SLATER ST
STUART FL 34997

Name

Lawrence E. Crary III

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

555 Colorado Ave., Suite 1

City

Stuart

FL

Zip Code

34994

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

Lawrence E. Crary III

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

(NOTE: Registered Agent signature required when reinstating)

4/26/00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	☒ Delete
NAME	HOLT, MARGARET	
STREET ADDRESS	505 FINI DRIVE	
CITY-ST-ZIP	STUART FL 34996	
TITLE	D	☒ Delete
NAME	HOLT, VALGENE	
STREET ADDRESS	505 FINI DRIVE	
CITY-ST-ZIP	STUART FL 34996	
TITLE	PD	☐ Delete
NAME	Alison Gallagher	
STREET ADDRESS	444 Robalo Ct.	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE	V D	☐ Delete
NAME	Kevin Gallagher	
STREET ADDRESS	444 Robalo Ct.	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE	S	☐ Delete
NAME	Margaret Holt	
STREET ADDRESS	505 Fini Drive	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☒ Addition
NAME	Alison Gallagher	
STREET ADDRESS	444 Robalo Ct.	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE	V D	☐ Change ☒ Addition
NAME	Kevin Gallagher	
STREET ADDRESS	444 Robalo Ct.	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE	S	☐ Change ☒ Addition
NAME	Margaret Holt	
STREET ADDRESS	505 Fini Drive	
CITY-ST-ZIP	Stuart, FL 34996	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Alison Gallagher

Alison Gallagher, Pres.

4/26/00

(561) 287-0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)