

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000025583

Entity Name

GARVIN SMITH PRODUCTIONS, INC.

FILED

Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90084 047 ***158.75

Principal Place of Business
N.W. 58TH TERRACE
GAINESVILLE FL 32605

Mailing Address
2111 N.W. 58TH TERRACE
GAINESVILLE FL 32605-3387

00000000



DO NOT WRITE IN THIS SPACE

Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	59-3508150	Applied For
		Not Applicable

5. Certificate of Status Desired	☒ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
SMITH, GARVIN-
2111 N.W. 58TH TERRACE
GAINESVILLE FL 32605

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL
Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE
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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
D SMITH, GARVIN 2111 N.W. 58TH TERRACE GAINESVILLE FL 32605	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: Garvin Smith 3-6-2000 352-336-7673

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)