

0377715



**FILED**  
**May 05, 1999 8:00 am**  
**Secretary of State**

05-05-1999 90098 019 \*\*\*150.00

1. Corporation Name  
**GDT INVESTMENTS, INC.**

Mailing Address  
502 W. CHERRY ST.  
PLANT CITY FL 33566

DO NOT WRITE IN THIS SPACE

Applied For
Not Applicable

Suite, Apt. #, etc.

Zip Country  
33813-1308 USA

2a. Mailing Address  
EST POST OFFICE BOX 6276

Suite, Apt. #, etc.

27 City & State  
28 LAKELAND, FLORIDA

29	Zip	Country
29	33807-6273	USA

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

**9. Name and Address of Current Registered Agent**

10. Name and Address of New Registered Agent

81	Name <b>GORDON R. CUTHBERTSON</b>
82	Street Address (P.O. Box Number is Not Acceptable) <b>3815 BENT TREE LOOP, WEST</b>
83	
84	City <b>LAKELAND,</b>

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 GORDON R. COIMBERSON APRIL 30, 1999  
(NOTE: Registered Agent signature required when reinstating) DATE

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

(NOTE: Registered Agent signature required when reinstating.

DATE \_\_\_\_\_

## OFFICERS AND DIRECTORS

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P/D	<input type="checkbox"/> DELETE
NAME	GORDON R. CUTHBERTSON	
STREET ADDRESS	3815 BENT TREE LOOP, WEST	
CITY-ST-ZIP	LAKELAND, FLORIDA 33813-1308	

TITLE	VP/D	<input type="checkbox"/> DELETE
NAME	G. DANIEL HUBBARD	
STREET ADDRESS	502 WEST CHERRY STREET	
CITY-ST-ZIP	PLANT CITY, FLORIDA 33566-2314	

TITLE	T/D	<input type="checkbox"/> DELETE
NAME	TERRY L. BYERS	
STREET ADDRESS	2009 DEERFIELD DRIVE	
CITY-ST-ZIP	LAKELAND, FLORIDA 33813-1318	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

4.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> 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:**  **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
GORDON R. GUTHBERTSON PRESIDENT

APRIL 30, 1999 941-701-1915

Date \_\_\_\_\_

Daytime Phone #

CR2E034 (11/98)