

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001687

1. Entity Name

GOOSE POND AG, INC.

FILED
Feb 14, 2002 8:00 am
Secretary of State

02-14-2002 90047 008 ****61.25

Principal Place of Business

Mailing Address

1801 HERMITAGE BLVD., SUITE 600
TALLAHASSEE FL 32308

1801 HERMITAGE BLVD. SUITE 600
TALLAHASSEE FL 32308

2. Principal Place of Business

1801 HERMITAGE BLVD.

3. Mailing Address

1801 HERMITAGE BLVD

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

SUITE 100

City & State

TALLAHASSEE FL 32308

City & State

TALLAHASSEE FL 32308

Zip

32308

Country

USA

Zip

32308

Country

USA

4. FEI Number

59-3414409

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TODD, DAVID E.
1801 HERMITAGE BLVD, STE 100
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

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

TITLE DVAS ☒ Delete
NAME HORTON, JAMES W
STREET ADDRESS 1801 HERMITAGE BLVD, STE 600
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE D ☐ Delete
NAME BENNETT, DOUGLAS W
STREET ADDRESS 1801 HERMITAGE BLVD., SUITE 600
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE DVAT ☐ Delete
NAME GRAY, LYNNE M
STREET ADDRESS 1801 HERMITAGE BLVD, STE 600
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE P ☐ Delete
NAME CONRAD, JEFFREY A.
STREET ADDRESS 99 HIGH ST, 26 FLR
CITY-ST-ZIP BOSTON MA

TITLE V ☐ Delete
NAME MCBRIDE, JAMES W.
STREET ADDRESS 99 HIGH ST, 26 FLR
CITY-ST-ZIP BOSTON MA

TITLE ST ☐ Delete
NAME HORGAN, FREDERICK B.
STREET ADDRESS 99 HIGH ST, 26 FLR
CITY-ST-ZIP BOSTON MA

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DVAS ☒ Change ☒ Addition
NAME SMITH, JEFFREY
STREET ADDRESS 1801 HERMITAGE BLVD, SUITE 100
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1801 HERMITAGE BLVD, SUITE 100
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1801 HERMITAGE BLVD, SUITE 100
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(j), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frederick B. Horgan 01/26/02

Date

617 747 1605

Daytime Phone #

CR2E037 (9/01)