

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 013878

1. Entity Name

GTC, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90159 014 ***150.00

Principal Place of Business

Mailing Address

502 FIFTH STREET
STE 400
PORT ST JOE FL 32456
US

P.O. BOX 220
PORT ST JOE FL 32457-0220
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0432770

Applied For

Not Applicable

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

ELLMER, MARK R
502 FIFTH STREET
SUITE 400
PORT ST JOE FL 32456

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

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 NAME STREET ADDRESS CITY-ST-ZIP	DP LEWIS, JOHN M 502 FIFTH STREET PORT ST JOE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTS DIPAULI, ROBERT V 502 FIFTH STREET PORT ST JOE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV VAUGHAN, J H 502 FIFTH STREET PORT ST JOE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FAISON, JAMES B 502 FIFTH STREET PORT ST JOE FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ELLMER, R M 502 5TH ST PORT ST JOE FL 32456	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition *Please see the attached list of Officers and Directors.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition *Please see the attached list of Officers and Directors.
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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:

WALTER E. LEACH, JR
WALTER E. LEACH, JR 4/25/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

#013878

952116

Title: V
Name: Lisa R. Hood
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: V
Name: James B. Faison
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: AS
Name: Neil A. Torpey
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: AS
Name: Shirley J. Linn
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: D
Name: Daniel G. Bergstein
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: D
Name: George E. Matelich
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: D
Name: Frank K. Bynum, Jr
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: D
Name: Anthony J. DiNovi
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: D
Name: Kent R. Weldon
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

GTC, Inc.
Attachment 1 – 2000 UBR
Directors and Officers

Title: D/C
Name: Jack H. Thomas
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: Eugene B. Johnson
Name: D/V
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: M
Name: John P. Duda
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: P
Name: John H. Vaughan
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: V/S
Name: Walter E. Leach, Jr.
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: V
Name: Timothy W. Henry
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: V
Name: Michael J. Stein
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456

Title: V
Name: S. Whitfield Edwards
Street Address: 502 Cecil G Costin, Sr. Blvd.
City – ST – Zip: Port St. Joe, FL 32456