

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 441565

1. Entity Name
G.A. FOOD SERVICES OF PINELLAS COUNTY, INC.

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90070 041 ***150.00

Principal Place of Business Mailing Address
12200 32ND COURT NORTH 12200 32ND COURT NORTH
ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716-1803



DO NOT WRITE IN THIS SPACE

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 **59-1485677** 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

LOBIANCO, JAMES J.
12200 32ND COURT NORTH
ST. PETERSBURG FL 33716

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

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
VD	LOBIANCO, KENNETH A	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
8285 30TH AVE. N.	ST PETERSBURG FL		
PD	LOBIANCO, JAMES J	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2061 OCEANVIEW DR	TIERRA VERDE FL 33715		
SD	LOBIANCO, KAREN A	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2061 OCEANVIEW DR	TIERRA VERDE FL 33715		
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<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: *Kenneth A. Lobianco* 4-4-00 727-573-2211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # X312

CR2E034 (9/99)