

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 515010**

1. Entity Name

GERIL DEVELOPMENT CORPORATION

Principal Place of Business

**857 VANCE CIRCLE NE
PALM BAY FL 32905**

Mailing Address

**857 VANCE CIRCLE NE
PALM BAY FL 32905**

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 **59-1934153**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SCHLUESSELL, GERRI R.
857 NORTHEAST VANCE CIRCLE
PALM BAY FL 32905**

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

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, 2001 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

TITLE	P	<input type="checkbox"/> Delete
NAME	SCHLUESSELL, GERRI R.	
STREET ADDRESS	857 VANCE CIRCLE NE	
CITY-ST-ZIP	PALM BAY FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHLUESSELL, ALLIS T.	
STREET ADDRESS	982 MARIPOSA DR NE	
CITY-ST-ZIP	PALM BAY FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	FLOYD, DAVID W.	
STREET ADDRESS	857 VANCE CIRCLE NE	
CITY-ST-ZIP	PALM BAY FL	
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		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERRI R. FLOYD	(MARRIED)
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

GERRI R. FLOYD
Gerri R. Floyd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/25/01

Daytime Phone #

321-725-9167**FILED**
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90081 045 ***150.00



DO NOT WRITE IN THIS SPACE

0078126

CR2E034 (10/00)

241706 Attachment
51510 515018

Marriage Certificate

Clark County, Nevada

No. D 292969

This is to Certify that the undersigned did on the 23rd day of March, 2001

at, Candlelight Wedding Chapel Las Vegas, Nevada, join in lawful wedlock
Address or Church City

DAVID W. FLOYD of PALM BAY, FLORIDA
City State

GERALDINE R. SCHLUESSELL of PALM BAY, FLORIDA
City State

with their mutual consent, in the presence of William A. Harrison
Type or Print Name of Witness

Pastor Darla Spain
Type or Print Official's Name & Title

Trinity Life Center
Type or Print Church or Affiliation

1000 E. St. Louis Blvd.
Type or Print Address of Official

Las Vegas, NV 89104
Type or Print City, State, Zip

Shirley B. Parraguirre
Signature of Official

SHIRLEY B. PARRAGUIRRE, COUNTY CLERK

ORIGINAL: TO BE GIVEN TO THE PARTIES MARRIED

arrived
3/23/01

Gerald R. Floyd