

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 633546

1. Entity Name

GEM PRODUCTS, INC.

FILED

Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90496 001 ***150.00

03-01-2001 90496 002 *****8.75

62990



DO NOT WRITE IN THIS SPACE

Principal Place of Business 140 INDUSTRIAL LOOP ORANGE PARK FL 32073		Mailing Address 140 INDUSTRIAL LOOP ORANGE PARK FL 32073	
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 59-2027696	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BRIDGEWATER, ERLE S 2095 SALTMYRTLE LANE ORANGE PARK FL 32073	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) 140 Industrial Loop	
City Orange Park	Zip Code FL 32073

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: *Erle S. Bridgewater (change of address)* DATE: 2/16/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME BRIDGEWATER, CANDACE STREET ADDRESS 2637 SIGMA CT CITY-ST-ZIP ORANGE PARK FL	<input type="checkbox"/> Delete	TITLE D NAME Bridgewater, Candace STREET ADDRESS 140 Industrial Loop CITY-ST-ZIP Orange Park, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VMD NAME BRIDGEWATER, MATTHEW STREET ADDRESS 1696 TALL TIMBER DR CITY-ST-ZIP ORANGE PARK FL	<input type="checkbox"/> Delete	TITLE PD NAME Bridgewater, Matthew STREET ADDRESS 1734 Alps Court CITY-ST-ZIP Orange Park, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD NAME BRIDGEWATER, ERLE S STREET ADDRESS 2095 SALT MYRTLE LANE CITY-ST-ZIP ORANGE PARK FL 32073	<input type="checkbox"/> Delete	TITLE Treasurer, D NAME Bridgewater, Erle S. STREET ADDRESS 140 Industrial Loop CITY-ST-ZIP Orange Park, FL 32073	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE V NAME LEE, FRED STREET ADDRESS 286 BONNLYN DR. CITY-ST-ZIP ORANGE PARK FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE S NAME SETTLE, LISA STREET ADDRESS 3075 MOODY AVE. CITY-ST-ZIP ORANGE PARK FL	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME ZHU, JOSEPH S STREET ADDRESS 28 B HOLLANDALE LN CITY-ST-ZIP CLIFTON PARK NY 12065	<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: *Erle S. Bridgewater, Treasurer* DATE: 2/16/01

CR2E034 (10/00)