

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752423

1. Entity Name

GULF SPECIMEN MARINE LABORATORIES, INC.

Principal Place of Business

222 CLARK DRIVE
P.O. BOX 237
PANACEA FL 32346
US

Mailing Address

222 CLARK DR
P.O. BOX 237
PANACEA FL 32346
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 59-2021454

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

RUDLOE, ANNE
222 CLARK DRIVE
PANACEA FL 32346

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Delete
D
RUDLOE, JACK J.
STREET ADDRESS 275 CLARK DRIVE
CITY-ST-ZIP PANACEA FL

TITLE NAME ☐ Change ☒ Addition
Rudloe, Anne Director
STREET ADDRESS 151 Clark Dr
CITY-ST-ZIP Panacea, FL

TITLE NAME ☐ Delete
ST
RUDLOE, JACK J.
STREET ADDRESS 275 CLARK DRIVE
CITY-ST-ZIP PANACEA FL

TITLE NAME ☐ Change ☒ Addition
David Frisby
STREET ADDRESS 265 W Madison St
CITY-ST-ZIP Monticello, FL 32344

TITLE NAME ☐ Delete
V
RUDLOE, JACK J.
STREET ADDRESS 275 CLARK DRIVE
CITY-ST-ZIP PANACEA FL

TITLE NAME ☐ Change ☒ Addition
Charles McMurray
STREET ADDRESS 115 N Franklin Blvd
CITY-ST-ZIP Tallahassee, FL 32301

TITLE NAME ☐ Delete
PD
RUDLOE, ANNE
STREET ADDRESS 275 CLARK DRIVE
CITY-ST-ZIP PANACEA FL

TITLE NAME ☐ Change ☒ Addition
James Culpepper
STREET ADDRESS 2121 Amherst St
CITY-ST-ZIP Palo Alto, Ca. 94306

TITLE NAME ☐ Delete
D
ARONSON, MILTON
STREET ADDRESS 5820 BIKINI WAY SOUTH
CITY-ST-ZIP ST PETERSBURG FL

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Delete
D
LANDERS, JAY
STREET ADDRESS 5009 BRILL POINT
CITY-ST-ZIP TALLAHASSEE FL

TITLE NAME ☐ Change ☐ Addition

12. 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 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

Anne Rudloe 4/1/02 880 984-5297

Date

Daytime Phone #

0061944

CR2E037 (9/01)



DO NOT WRITE IN THIS SPACE