

# 2002 UNIFORM BUSINESS REPORT (UBR)

0007533 AT

DOCUMENT # A96000001448

1. Entity Name

G.W. PARTNERS, LTD. 1

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAY 13 PM 12:57

4/5/28

Principal Place of Business

2078 SOUTH ORANGE BLOSSOM  
APOPKA FL 32703

Mailing Address

2078 SOUTH ORANGE BLOSSOM  
APOPKA FL 32703



2. Principal Place of Business

2070 S. Orange Blossom Trail  
Suite, Apt. #, etc.

3. Mailing Address

2070 S. Orange Blossom Trail  
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

Apopka FL

City & State

Apopka FL

4. FEI Number

65-0687470

Applied For

Not Applicable

Zip 32703

Country USA

Zip 32703

Country USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOOD, KENNETH  
2078 SOUTH ORANGE BLOSSOM  
APOPKA FL 32703

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.

DATE

9. Capital Contributions as Shown on record.

\$1,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P96000064842  
NAME GASMART, INC.  
STREET ADDRESS 2078 SOUTH ORANGE BLOSSOM  
CITY-ST-ZIP APOPKA FL 32703

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 2070 S. Orange Blossom Trail  
CITY-ST-ZIP Apopka FL 32703

STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

580005664315-3  
-06/03/02--01030--024  
\*\*\*\*150.00 \*\*\*\*150.00

CR2E003 (9/01)

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/25/02

407-886-3338

Date

Daytime Phone #