

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90055 030 ***150.00

DOCUMENT # F03000000487

1. Entity Name
GSBS, P.C.



Principal Place of Business
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101

Mailing Address
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01262006

Chg-P

CR2E034 (11/05)

4. FEI Number

87-0335107

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

VALENT, PATRICK
TWO SOUTH UNIVERSITY DRIVE STE. 245
PLANTATION, FL 33324

Name
Robert Lara

Street Address (P.O. Box Number is Not Acceptable)

2 South University Drive #245

City
Plantation

FL

Zip Code
33324

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CP
STRANSKY, MICHAEL J
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCVP
BREMS, DAVID P
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SMITH, STEPHEN B
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BATENHORST, THOMAS E
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HENRIKSEN, D. SCOTT
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
MILLER, KEVIN B
375 WEST 200 SOUTH STE. 100
SALT LAKE CITY, UT 84101 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 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

Kevin B. Miller, Sec/Treas.

1-27-06

801-221-8600
Daytime Phone #