2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2003 8:00 am
Secretary of State
01-28-2003 90084 029 ***150.00

DOCUMENT # F12285

1. Entity Name
GILL LAND AND TIMBER INVESTMENTS, INC.

Principal Place of Business	Mailing Address
3956 NW 65TH AVENUE C/O RANDY L. GILL GAINESVILLE FL 32605 US	3956 NW 65TH AVENUE C/O RANDY L. GILL GAINESVILLE FL 32605 US
2. Principal Place of Business: 6210 N.W. 128th St.	3. Mailing Address: 6210 N.W 128th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Gainesville, FL	City & State: Gainesville, FL
Zip: 32653 Country	Zip: 32653 Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2141430 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GILL, RANDY L.
3956 NW 65TH AVENUE
GAINESVILLE FL 32653

7. Name and Address of New Registered Agent

Name: Same
Street Address (P.O. Box Number is Not Acceptable): See Address Change Above
City FL Zip Code

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: Randy L Gill Randy L. Gill 1/20/03
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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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 10	
TITLE	PS ☐ Delete	TITLE	Same ☒ Change ☐ Addition
NAME	GILL, RANDY L.	NAME	Same
STREET ADDRESS	3956 NW 65TH AVENUE	STREET ADDRESS	6210 NW 128th St.
CITY-ST-ZIP	GAINESVILLE FL	CITY-ST-ZIP	Gainesville FL 32653
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	I forgot to enclose fee payment with the original.	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Randy L Gill Randy L. Gill 1/20/03 352 331-3624
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #